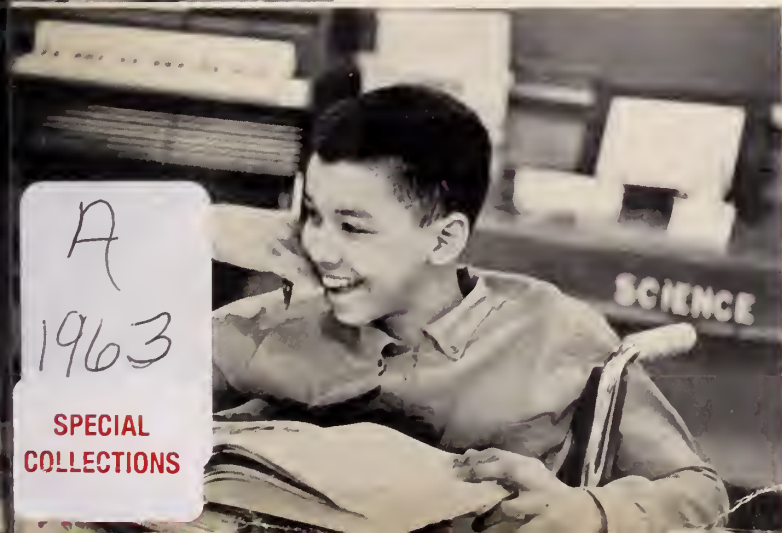




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1963 One Hundredth Annual Report



A
1963
SPECIAL
COLLECTIONS



1. An 1875 engraving shows Dr. Knight with patients in the Hospital's classroom. 2. Plaster impressions for foot braces were taken here. 3. Traction apparatus. 4. Children with crooked spines used an exercise apparatus.

*Annual
Report*

1963 One Hundredth Annual Report

New York Society for the Relief of the
Ruptured and Crippled
maintaining the

HOSPITAL FOR SPECIAL SURGERY

and the Margaret M. Caspary Clinic
The Philip D. Wilson Research Foundation
535 East 70th Street, New York 21, N. Y.

1963 One Hundredth Annual Report

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1863–1870



1870–1912

HISTORY OF THE NEW YORK SOCIETY FOR THE RELIEF

1863

Dr. James Knight founds the New York Society for the Relief of the Ruptured and Crippled with a 28-bed hospital in his home at 97 Second Avenue — between Fifth and Sixth Streets.

1870

The first hospital building is erected at Lexington Avenue and 42nd Street, a site “with a view of New Jersey’s wooded hills,” where the Hotel Commodore now stands.

1887

Dr. Virgil P. Gibney, first president of the American Orthopedic Association, assumes the hospital’s leadership and introduces orthopedic surgery.

1912

The hospital moves to Second Avenue and 42nd Street.

1925

The hospital is headed by physician and surgeon Dr. William B. Coley,

who is to initiate occupational therapy and expand the physiotherapy facilities.

1934

Dr. Philip D. Wilson leaves Massachusetts General Hospital to become our fourth surgeon-in-chief. Under his outstanding leadership the hospital becomes a world-renowned center and enormous strides are made in orthopedic surgery.

1939

President Franklin D. Roosevelt congratulates the hospital on its 75th anniversary.

1940

The Hospital for the Ruptured and Crippled is renamed the Hospital for Special Surgery.

1949

Spurred on by Dr. Wilson’s recognition of the vital need for broader services afforded by association with a

1912-1955

OF THE RUPTURED AND CRIPPLED

major medical center, the hospital begins its affiliation with The New York Hospital-Cornell Medical Center.

1954

Governor Thomas E. Dewey lays the cornerstone for the hospital's present building; he cites the importance of voluntary hospitals.

1955

The Hospital for Special Surgery moves to its modern new home overlooking the East River at 70th Street. At this time it establishes the School of Practical Nursing. Dr. Wilson resigns as surgeon-in-chief to head the new research program and Dr. T. Campbell Thompson succeeds him.

1958

President Dwight D. Eisenhower congratulates the hospital on its 95 years of outstanding service to mankind.

1960

The Philip D. Wilson Research Foun-

1955-

dation becomes the first orthopedic hospital research facility in the country with its own building when it moves to the spacious new Caspary Research Building.

1962

Dr. Philip D. Wilson retires as director of research after 28 years of devoted service to the hospital and the research program. Prominent Swedish scientist, Dr. Goran C. H. Bauer, assumes leadership of the research program.

1963

President John F. Kennedy congratulates the hospital on its centennial anniversary. Dr. Robert L. Patterson, Jr., who has been closely associated with the hospital for 27 years, becomes surgeon-in-chief as Dr. T. Campbell Thompson resigns to devote more time to teaching and private practice.

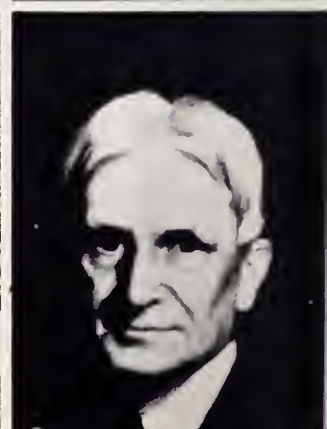


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1. Sayre suspension apparatus for hold the head and body in straight position while corrective plastic cast was being applied for scoliosis or spinal tuberculosis. 2. Mechanical devices provide a form of exercise for patients. 3. Even at the turn of the century viewing stands existed so that students could watch operations. 4. Research was carried out in the Hospital's small laboratories. 5. Dr. Coley was a pioneer in the operative treatment of hernia but his chief interest was in the study of tumors of bones. 6. In 1903 the Hospital established its first adult ward. 7. Dr. Royal Whitman earned an international reputation during his 40 years with the Hospital.

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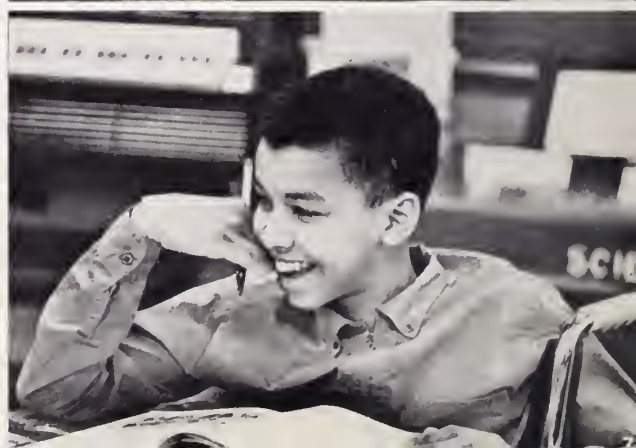
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REPORT OF THE PRESIDENT

1963 was the 100th anniversary of the founding of The Hospital for Special Surgery. A year of centennial activities stimulates thought about the purpose and importance of a hospital complex such as ours. I should like to touch on some of the highlights in the history of the Hospital and express some of my thoughts about its present and future position.

The Hospital for Special Surgery opened its doors one hundred years ago in the home of Dr. James Knight, as the first orthopedic hospital in the United States. The nation was in the throes of the Civil War. New York City had a population of 700,000. Soon thereafter, a 200-bed hospital was built on the present site of the Hotel Commodore. In the beginning, the hospital only cared for crippled children, though it would accept adults on a clinic basis. Only the most elementary surgery was performed. In fact, Dr. Knight was strongly opposed to surgery and with good reason. Without adequate knowledge to guard against infection, the death rate from amputation was about 50% and from compound fractures even higher.

The Hospital of today is very different from the one 100 years ago. This is partially true because of the tremendous advances made in medical care and because of the changes in the very diseases and conditions that require treatment. In the early days perhaps 80% of all the cases were tubercular. Polio, osteomyelitis, and rickets were common. Today all these diseases have virtually disappeared.

Early in this century, the Hospital commenced the training of post-graduate residents on a systematic basis. Over the years

1. The Main Entrance is a busy thoroughfare. 2. A clinic for cerebral palsy victims, mostly children, is operated by the Hospital. 3. and 4. A nursery school for palsy children meets twice a week with a program of activities tailored to their physical limitation. 5. Administering every detail of the Hospital's complex operation is Director T. Gordon Young. 6. Each prescription must be carefully measured. 7. Studying can be fun in the Hospital's school, P.S. 401.

the period of training has lengthened from one year to two, to three, to three and one half, and now, in the case of certain exceptional doctors to four years. Today, we have 450 alumni spread all over this country and in 30 foreign countries and they include some of the most distinguished orthopedic surgeons of the world.

Under the brilliant leadership of Dr. Philip D. Wilson, Surgeon-in-Chief from 1935 to 1955, the clinic services were greatly expanded, the resident training program strengthened and arthritic and rheumatic diseases attained new importance as a specialty of the Hospital under Dr. Richard H. Freyberg. Dr. Wilson was succeeded by his right-hand man, Dr. T. Campbell Thompson, who has developed numerous well-known operative procedures and contributed importantly to orthopedic literature. As Surgeon-in-Chief, he set up the course of teaching for Cornell students and established a policy of rotation of New York Hospital residents and interns through our hospital. A school to train licensed practical nurses was established in 1955 and more than 300 have already been graduated.

Let us turn to what is — where does this hospital stand now. In line with modern thinking, we became convinced that a close association with a teaching institution was desirable and embarked upon an affiliation agreement in 1949 with The New York Hospital — Cornell Medical Center. This relationship affords the opportunity for the interplay of many minds and diverse disciplines, for the teaching of undergraduates and the exchange of information at all levels. I can say without qualification that

there has developed a spirit of cooperation and friendliness and a desire to work together with a common purpose that assures a sound and enduring foundation for our affiliation.

In 1955, we moved into our new Hospital at 70th Street and The Franklin Delano Roosevelt Drive. With its completion, we might have been entitled to pause for breath but Dr. Wilson, with characteristic energy, conceived of a center for research in orthopedic and rheumatic diseases and immediately set about the task of raising the necessary funds. Through the great generosity of the Casparys, the Coes, Helen Bicknell and many others the research program has been substantially endowed and The Alfred H. Caspary Research Building was completed and dedicated in 1960. This handsome building houses the most modern laboratories and research equipment and reflects our awareness that teaching young doctors in a research environment is vitally important to raise standards of medical care and teaching.

Under the able leadership of an outstanding orthopedic scientist from Sweden, Dr. Göran C. H. Bauer, a comprehensive program is being developed and we expect to make significant contributions in some of the areas about which little is known today, such as cerebral palsy, fractures in the aged, and crippling arthritis, which is itself a whole family of diseases.

With all the fine buildings and equipment and the atmosphere of efficiency, there is a feeling of warmth and friendliness about this institution that is as real and tangible as the walls themselves. Whether it emanates from the lay board or the volun-

teers, the doctors, nurses or other staff, it is commented upon constantly by the patients. That it contributes measurably to their care and cure, I have not the slightest doubt whatever.

As you can see, this Hospital has not been standing still — we are keeping pace with the great medical advances of our times and intend to maintain our place in the front ranks. As we embark upon our second century, we have a new hospital, second to none in patient care, teaching at all levels and an excellent research program. We face the future with confidence, confidence that we will play our part in the wonderful medical developments that surely lie ahead.

Finally, I should like to express my deep appreciation for the support I have received from the Board of Managers, and T. Gordon Young, the Hospital's Director, from the doctors, nurses, women's auxiliary, volunteers and all the other devoted workers who make this Hospital the superb institution that it is today.



Respectfully submitted,
Philip Bastedo
President

REPORT OF THE SURGEON-IN-CHIEF

It is a signal honor to render my first annual report as Surgeon-in-Chief. The Year 1963 saw the culmination of one hundred years of service by the New York Society for the Relief of the Ruptured and Crippled. May 1st, 2nd, and 3rd were days of celebration, the highlight of which was a magnificent scientific program entitled, "Prevention of Disease in a Changing World." The program was entered into by top guest speakers from all over the world.

Dr. T. Campbell Thompson resigned as Surgeon-in-Chief and was succeeded by Dr. Robert Lee Patterson, Jr., who accepted the appointment on a full-time basis. Dr. John H. Doherty assumed a full-time position as Executive Assistant to the Surgeon-in-Chief, Dr. Allan E. Inglis a position as geographic full-time Executive Assistant, and Dr. Bernard Jacobs was placed in charge of the Orthopaedic Division at the Bronx Veterans Administration Hospital.

Routine activities at the Hospital continued at a high level. There were approximately 50,000 out-patient visits during 1963. More operations were performed during the year than in any other year in the history of the Hospital; there being some 1971 procedures. Occupancy, which is often a misleading factor, was 80.9%, there being some 3070 admissions to the Hospital. The Hospital was inspected by the Joint Commission on Accreditation of Hospitals, and our Hospital and Residency Training Program were approved for the next three years.

ORTHOPAEDIC DIVISION

There are two primary functions in this Division of our Society. One is providing the best possible patient care, and the second is the training of Residents and Fellows. The following men finished their residency training during 1963: Dr. Richard Stark, Dr. Ronald Match, Dr. Donald Pizar, Dr. Anthony Gristina, and Dr. George Rovere. Orthopaedic surgeons wishing to complete another year of specialty training, known as Fellows, and representing many parts of the world joined our Staff. They were: Dr. Hideo Fujii—Japan; Dr. Pedro Bacalao—Venezuela; Dr. Carlos Matamoros—Colombia; Dr. Eduardo Castro-Murillo—Costa Rica; Dr. Joaquin Soler-Bechara—Puerto Rico; Dr. George McPherson—Canada; Dr. Nour Eldin Bahgat—Sweden; Dr. Carlos Rivera-Williams—Mexico; and Dr. Richard Braun, Dr. Alice Garrett, and Dr. Paul Flicker from the United States.

ORTHOPAEDIC SERVICE

Statistics

	Children's Service	Adult Service	Service Children and Adults
Total cases admitted	384	331	2,301
Total cases discharged	361	350	1,821
Complications	5	8	39
Infections	3	3	34
Deaths	0	1	11
Autopsies	0	0	6

Operations

Total Open Operations	251	315	1,378
Total Closed Operations	10	9	66
Total Operations	261	324	1,444
Deformities following Infantile Paralysis	36	9	27
Deformities following Lesions of Nervous System other than Infantile Paralysis	17	3	37
Fractures, Dislocations and their Sequelae	19	14	263
Complications of and Deformities following Tuberculosis Diseases of Bones and Joints	1	2	1
Non-Tuberculous Affections of Bones and Joints and their Sequelae	42	81	574
Congenital Deformities	118	14	100
Acquired Deformities	10	37	147
Tumors	8	43	143
Unclassified	9	21	86
Total	261	324	1,378

SPECIAL CLINICS

Hand Clinic: Visits to the Hand Clinic rose to 1068, and operations on the hand alone were performed on 297 patients. Particular emphasis has been on rheumatoid arthritis and congenital anomalies. This service, under the capable direction of Dr. Lee Ramsay Straub, has become one of the primary interests in our Hospital.

Hip Clinic: There were 89 new patients seen and 661 re-visits. Most of those cases admitted to the Hospital, of course, were operated upon. The main purpose of this clinic is one of indexing patients with interesting and unusual hip problems to facilitate clinical studies such as idiopathic neurosis, the value of osteotomy in degenerative hip disease, and iliac osteotomy in

congenital dislocation of the hip. Dr. Philip D. Wilson, Jr., Chief of the Hip Clinic, has had excellent cooperation from all members of the Staff.

Club Foot Clinic: Under the able supervision of Dr. Alexander Hersh, the Club Foot Clinic has continued to be of real service to these unfortunate children. There were a total of 1561 visits to this Clinic during the year. Twenty-five patients were admitted to the Hospital, and thirty-three operations were performed on them.

Cerebral Palsy Clinic: Regular clinics are conducted twice weekly on Tuesday and Thursday with three physicians ordinarily carrying out simultaneous examinations. New patients are presented to the entire clinic staff at the Thursday clinics. Evaluation of new patients involved participation of 4th year medical students in addition to the clinic staff. A monthly case conference is held in the Lecture Hall for the interest of Residents and Staff. A group program for children of nursery school age is conducted once a week. In addition to services at The Hospital for Special Surgery, the Cerebral Palsy Clinic maintains a supervisory function in two other programs: (1) Cerebral Palsy Center of Nassau County for which the Hospital has assumed responsibility for medical direction. At present the program is served by three members of our Staff and is visited regularly by Residents, Fellows and Medical Students. (2) HC20 classes at P.S. 199. This is a combined educational and medical program for children with severe orthopaedic handicaps including

cerebral palsy, poliomyelitis, congenital anomalies, etc. It serves more than 50 children of school age approximately 50% on referral from The Hospital for Special Surgery. This activity has been under the direction of the Cerebral Palsy Clinic for more than fifteen years. The Hospital was originally designated in the New York City budget as the supervising medical agency.

During 1963, there were 144 new patients admitted for diagnosis to the Cerebral Palsy Clinic. Operations were performed on 123 of the patients admitted to the Hospital. A great deal of credit should be given to Dr. William Cooper for his organization and teaching of this subject, not only to residents, but also to visitors and medical students.

Fracture Clinic: A Combined Fracture Service under the direction of Dr. Preston A. Wade, and the assistance of Dr. Rolla D. Campbell, Jr., continued to aid our Residency Training Program in the treatment of trauma. Two of our Residents are there at all times. They not only work with the general surgical resident in the treatment of the cases, but also supervise and help teach the third year medical students. The Eighth Annual Trauma Course was given in June, which included some fifty lectures given by members of the faculty at Cornell University Medical College and the staff members of The New York Hospital and The Hospital for Special Surgery. Approximately 100 surgeons attended the course.

Neuro-Muscular Diagnostic Service: The Hospital is most fortunate in having Dr. Joseph Moldaver as Chief of this Clinic.

During 1963, there were 729 visits to this Clinic, and all the various modalities used such as electromyographic studies were carried out. Two of the most interesting studies have been the genetic aspects of some diseases, such as myotonia dystrophica, dystonia musculorum, Charcot-Marie-Tooth, and the hypertrophic polyneuropathies of the Dejerine-Sottas type. Facial palsies of different etiologies have been evaluated also.

Metabolic Bone Disease Clinic: The Clinic continued to grow this year and 179 patients were seen. Radiographs were taken routinely of the left elbow in patients suffering from osteoporosis of the spine. The thickness of the cortex was measured from the radiograph and compared to the apparent density of the spine radiograph. Experience with this technique is enabling us to correlate these two parameters and possibly get a better idea of the density of the spine and thus diagnose osteoporosis more accurately and to quantitate the degree of osteoporosis. Meanwhile, iliac crest biopsies were taken from cadavers as well as patients suffering from fractured hips and the weight of these samples was compared to the thickness of the radial shaft measured from x-rays. A good correlation between these was found.

Demyelinating Disease Clinic: Dr. Harold Wainerdi reports that he is following approximately 100 patients with multiple sclerosis, of which there are said to be roughly 250,000 victims in the United States. This past year there were 425 visits to his Clinic.

OUT-PATIENT DEPARTMENT

Orthopaedic Clinics	New Admissions	Revisits 1st this Year	Referred Visits	Revisits	Total
General	4,835	5,355	0	9,326	19,516
Amputee	73	61	1	288	423
Chest	5	6	1	34	46
Cerebral Palsy	2	66	5	1,575	1,648
Club Feet	8	115	53	1,385	1,516
D. M. D.	9	73	1	285	368
Hand	64	101	116	787	1,068
Hip	8	98	81	572	759
Low Back ..	0	0	0	0	0
Neuromuscular diagnostic..	4	90	162	473	729
Foot Disorder	1	44	44	414	503
Polio	45	355	12	914	1,326
Scoliosis	5	139	87	431	662
Speech	0	9	0	148	157
Bone Metabolic	6	19	114	140	179
Rheumatic Disease Clinic					
Medical Clinics					
Pediatrics	1	1	3	43	48
Hemophillia	4	0	0	6	10

ORTHOPAEDIC END RESULT CLINIC

Total cases sent for	323
Total cases returned and examined	169
Total number of operations rated	184
Percentage of patients returned and examined	52.32%
Total cases sent for January 1, 1938 through December 31, 1963	7,384
Total cases returned and examined	4,788
Percentage of patients returned and examined	68.5%

DIVISION REPORTS

Rheumatic Disease Service: Dr. Richard H. Freyberg, Chief of the Rheumatic Disease Service, reports that several changes have occurred on the Staff and in the activities of his section. There has been a much closer integration of the Orthopaedic and Rheumatic Disease Departments. This was in part accomplished by the setting up the Rheumato-Orthopaedic Clinical Conference which meets one morning a week. At this Conference, rheumatologists and orthopaedic surgeons discuss clinically what can be done surgically for the benefit of the patients with various forms of arthritis. Staff changes were as follows: (1) Dr. Marion Tyndall has become Emeritus Associate Attending Physician and continues to be active in the Clinics and In-Patient Service. (2) Dr. Juan Jose Chiari finished a year as Fellow in Rheumatic Diseases and returned to his native Panama. (3) Dr. Eduardo Castro-Murillo finished a six months extension of a P.H.S. traineeship, and returned to Costa Rica to become the first rheumatologist in his home country. (4) Dr. Harry Bienenstock became Physician to the Out-Patient Service.

RHEUMATIC DISEASE SERVICE

Statistics

	Private	Service	Total
Total cases admitted	359	110	469
Total cases discharged	336	106	442
Deaths	7	5	12
Autopsies	3	5	8

Radiology: Under the able leadership of Dr. Robert H. Freiberger, examinations totalling 28,914 have increased 24% above those since 1959. Material improvements in the Department have consisted of a new examination room equipped with an overhead crane, radiographic unit, and a horizontal tomograph which has proved most satisfactory. The image intensification and cine apparatus was extolled during 1963. In addition to the routine use of this equipment for gastrointestinal fluoroscopy, the apparatus has proved most useful in myelography, discography, and biopsy procedures, particularly vertebral biopsies. Moving pictures have been made of normal and diseased joints and for evaluation of operatively fused joints. A new x-ray projector was purchased during the year for use in the Conference and Lecture Hall on the second floor. It has aided greatly in permitting everyone to see the x-rays at the same time without having to resort to an illuminator. Dr. Lars Andren of the University of Lund in Malmo, Sweden, acted as Visiting Associate Professor of Radiology during the months of May and June.

DIVISION OF RADIOLOGY

	Patients	Films
Private	765	3,404
Semi-Private	1,665	7,873
Ward	3,799	15,547
Private Ambulatory	4,739	17,209
Outpatient Department	6,997	24,231
Personnel Health Service	690	1,407
Total	18,655	69,671

Anesthesiology: It is with real pride that Dr. Charles Burstein, Director of Anesthesia, reports that there was not one single death in the operating room from anesthetic complications.

DIVISION OF ANESTHESIOLOGY

	Number Administered
General	1,708
Spinal	9
Regional Block	89
Local	152
Total	1,958

Pediatrics: A Pediatric Medical Clinic is held once a week for follow-up on hospital discharges and work-up and immunization of patients referred from the Orthopaedic Clinic. We are indeed fortunate to always have a resident of the Pediatric Service from New York Hospital.

Laboratories: Under the competent leadership of Dr. Robert C. Mellors, who is also Associate Director of Research, there were 72,450 laboratory examinations in 1963, a 14% increase over the preceding year and a 67% increase over 1958. (See Table 1.) In addition, 10,787 serological examinations not included in this comparison were performed by Miss Doris Warren and her assistant in conjunction with blood group studies being undertaken at the Memorial-Sloan Kettering Cancer Center. Despite this increase in quantity of work, its high quality has been maintained by the untiring efforts of Mrs. Norma Bender and her staff. A quality control program in clinical chemistry is

being carried out by the Bureau of Laboratories of New York City and the test has shown by the range of acceptability that our results on the whole are excellent. Again during the year the members of the Clinical Laboratories have continued their large number of publications, speeches, and participation in academic medicine.

DIVISION OF LABORATORIES

	Examinations
Private	7,368
Semi-Private	24,698
Ward	15,050
Private Ambulatory	3,390
Outpatient Department	16,334
Personnel Health Service	2,497
Miscellaneous	1,585
Total	70,922

Physical Medicine & Rehabilitation: Dr. Anna Kara, Head of this Department, reported that approval of a three year Residency Training Program in Physical Medicine & Rehabilitation, in conjunction with The New York Hospital, had been renewed by the Council on Medical Education and Hospitals of the American Medical Association. A resident in this program had begun his training at The New York Hospital and will start at The Hospital for Special Surgery in July, 1964. Students from Columbia University continue to receive training in physical therapy. Miss Doris Nichols had four students in Occupational Therapy from New York University. A total of 34,632 physical therapy treatments were given in 1963, which was approxi-

mately 1000 more than given in 1962. The Hospital for Special Surgery continued to supply therapists for treating patients at Memorial Hospital. As agreed with Memorial Hospital, we continued to treat their out-patient referrals as well.

DIVISION OF PHYSICAL THERAPY

	Number of Treatments
Private	1,722
Semi-Private	8,373
Ward	4,927
Private Ambulatory	5,681
Out-Patient Department	13,929
Total	34,632

DIVISION OF OCCUPATIONAL THERAPY

	Patients Treated	Treatments 1963
Functional	226	1,925
Diversional	34	411
Total	260	2,363

	Diversional Treatments	Functional Treatments
Inpatients	411	816
Outpatients	0	1,136

At the end of my first year as Surgeon-in-Chief, I would like to express my deep appreciation to the professional and administrative staffs for their help in making the transition smooth and pleasant.



Respectfully submitted:
Robert Lee Patterson, Jr., M.D.
Surgeon-in-Chief

REPORT OF THE DIRECTOR OF RESEARCH

In last year's report we indicated the need for integration of the activities in the research laboratories with those of the hospital, and the activities of the entire institution with those of New York Hospital-Cornell University Medical College. In this area we have seen progress along the following lines:

a. The Board of Managers has approved and allocated money for developing the second floor in the laboratory wing to provide research and educational facilities consisting of a Medical Library (presently located in the Hospital wing), a Seminar Room (presently on the fourth floor of the laboratory wing) and Education Office, desk space for about 25 trainees, and space for certain epidemiological activities important to routine medical care and research alike. Considering that on the Hospital side the Lecture Hall and the School of Practical Nurses also are located on the second floor, the bridge between the two buildings should have more than symbolic importance when the new construction has been completed by September, 1964.

b. Aaron S. Posner, Ph.D. joined our staff on February 1, 1963, as Associate Director of Research to head a laboratory for study of ultrastructure of hard tissues. We feel it is of significant importance that academically Dr. Posner has been appointed Associate Professor of Ultrastructural Biochemistry in Dr. DuVigneaud's Department at C.U.M.C. Dr. Posner has been given opportunities to lecture to medical students and to participate in graduate teaching under the aegis of the Cornell Graduate School. There is no question in our minds that this

appointment will strengthen the scientific basis of our clinical activities and also solidify our relations with the College.

c. During 1963 our institution received federal grant support of an important type: an Orthopaedic Training Grant and a General Support Grant. The Training Grant will make it possible for us to give advanced research training in sciences related to orthopaedics as a continuation or extension of our residency program. We feel this is an important step toward fulfilling our ambitions as regards training of individuals suited for a career in the teaching of orthopaedics. At present two fellows, Alice Garrett, M.D. from the Rancho Los Amigos Hospital, Downey, California, and G. Duncan McPherson, M.D. from Vancouver, British Columbia, work under this grant. In addition, Richard Braun, M.D. has been awarded an N.I.H. post-doctoral fellowship. The General Support Grant will add to our possibilities to underwrite the costs for so-called pilot projects, and it has facilitated getting new projects off the ground. For example, with the aid of this grant, Dr. Posner could start his activities even before he received the grant designated for his laboratory.

d. The Metabolic Bone Clinic has been reorganized to become a meeting ground for internists, orthopaedists and basic scientists. Dr. Paul Saville, who is Assistant Professor in the Department of Medicine at C.U.M.C., has a full-time appointment here, is Head of the Metabolic Bone Clinic, and is doing experimental work together with Joseph K. Gong, Ph.D., a radiobiologist, who joined our staff in September, 1963.

e. During 1963 Dr. Mellors, Dr. Straub and Dr. Freyberg have intensified their joint efforts to study and to treat rheumatic disease manifestations: immunologists, pathologists, internists and surgeons meet at a weekly conference, and three fellows, Dr. Garrett, Dr. Braun and Dr. Soler-Bechara devote most of their activities to this project.

f. During 1963 we arranged a series of monthly lectures on subjects related to Metabolic Bone Disease with the aid of Melvin Horwith, M.D., of the Endocrinology Section of the Department of Medicine. These lectures have attracted an audience from neighboring institutions.

Inasmuch as our plans call for increasing the period of institutional training, the individual economy of the trainees will be correspondingly affected. In all probability, our selection of suitable candidates in the stiffening competition for talent will widen considerably if we could offer "on-campus" housing as is done by the Rockefeller Institute and Cornell Medical Center. Also, such facilities would increase our opportunities to offer exchange fellowships and visiting professorships in line with our long and valuable tradition of maintaining activities with leading orthopaedic institutions elsewhere, not least, overseas. This problem remains unsolved.

Income from our endowment funds is just adequate to cover one third of our present research budget. Optimal utilization of our facilities will demand an increase in this budget by a factor of two-to-three over the next couple of years. Experience during

the last year indicates that we have a good case for attracting support from the outside to permit this rapid growth. In the long run it may prove detrimental, however, to depend too heavily on outside support. We hope, therefore, that we will build a strong case for augmentation of our institutional funds.

A summary of individual research projects carried out in 1963 follows:



Respectfully submitted,
Göran C. H. Bauer, M.D.
Director of Research

RESEARCH PROJECTS

A. DIVISION OF RHEUMATIC DISEASES — Richard H. Freyberg, M.D.

Studies of the ocular effects of chloroquin derivatives used for prolonged treatment of 45 patients with rheumatoid arthritis were completed by Dr. Juan Jose Chiari and collaborators in the Department of Ophthalmology, New York Hospital-Cornell University Medical College. It was gratifying to learn from these studies that ocular changes were infrequent and mild when hydroxychloroquine sulfate was used in doses smaller than usually administered. Drs. Corcos, Rudd, Robbins and Rogoff have completed the extensive study of the occurrence of macroglobulins and serologic reactions in relatives of patients with progressive systemic sclerosis and the results are now being summarized. Drs. Corcos, Soler-Bechara, Mayer and Freyberg have prepared a scientific report of the occurrence of neutrophilic agranulocytosis in a patient with rheumatoid arthritis during treatment with d-penicillamine. Ongoing comparative evaluation of different anti-inflammatory agents used intra-articularly in patients with rheumatoid arthritis continued through the year. A critical evaluation was started of the effectiveness of and the difficulties encountered during prolonged treatment of patients with rheumatoid arthritis with gold salts used for maintenance therapy. This work is being done primarily by Dr. Soler-Bechara in collaboration with Drs. Kammerer, Squires, Rogoff and Freyberg and will not be completed until 1964.

**B. DIVISION OF EXPERIMENTAL PATHOLOGY—Robert C. Mellors,
M.D., Ph.D.**

IMMUNOPATHOLOGY OF RHEUMATOID ARTHRITIS: During the last few years we have had occasion to study several thousand microscopic sections of human lymphoid tissues containing cells which form immunoglobulins and antibodies. These cells are of particular interest in rheumatoid arthritis of adult type because they migrate in great numbers into the inflamed joint tissue and also produce the serum globulins called rheumatoid factor. We have found that immunoglobulins of all known types are also formed by the same closely related families of cells—germinal (reticular) centers and plasma cells—but usually only one type of immunoglobulin is present in an individual cell. One major objective of contemporary research is to suppress or regulate the growth and activity of these cells.

This work, now published, was undertaken with Dr. Korngold and was supported by the United States Public Health Service, National Institute of Arthritis and Metabolic Diseases.

ELECTRON PROBE MICROANALYSIS OF TISSUES: In the report of last year mention was made of the electron probe in the sub-cellular chemical analysis of tissues. This instrument has been installed and used in the analysis of two major constituents (calcium and phosphorus) in normal human cortical bone tissue. The minimum analytical sample was about 10^{-13} gm of element in a volume of 50 cubic microns, a sensitivity not achieved by

any other method. The Ca:P molecular ratio was found to be relatively constant irrespective of age and sex and was close to expectation for hydroxyapatite (10:6).

This work, in press, was undertaken with the assistance of Todd Solberg and Chen Ya Huang and was supported by the United States Public Health Service, Division of General Medical Sciences.

C. LABORATORY FOR IMMUNOLOGIC RESEARCH — Leonhard Korngold, Ph.D.

This laboratory has continued its studies of the proteins found in serums of patients suffering from multiple myeloma and macroglobulinemia of Wandenström. In collaboration with the Sloan-Kettering Institute for Cancer Research a preliminary investigation of the familial incidence of multiple myeloma was begun. Serums from two sisters suffering from this disease were analyzed by physico-chemical and immunologic methods. Although the abnormal serum proteins differed in many respects, their antigenic types were found to be the same.

Last year we reported that haptoglobins, the proteins of human blood that bind hemoglobin, can be typed by immunologic methods. In order to produce more potent immunologic reagents (antisera), large amounts of these proteins, the structure of which is genetically determined, were purified and subfractionated by special methods developed in this laboratory.

D. LABORATORY FOR SEROLOGICAL STUDIES IN CONNECTIVE TISSUE DISEASES — William C. Robbins, M.D.

This laboratory continues its investigations of the serological abnormalities in patients with connective tissue diseases, especially systemic lupus erythematosus (SLE), and related diseases or syndromes. The latter include rheumatoid arthritis, systemic sclerosis (scleroderma) Sjogren's syndrome, Raynaud's syndrome, nephritis, nephrosis, hemolytic anemia, thrombocytopenic purpura, pleuritis, pericarditis, chronic hepatitis, biliary cirrhosis, macroglobulinemia, hypogammaglobulinemia, myasthenia gravis, Hashimoto's thyroiditis, cerebral vasculitis, polymyositis, polyarteritis, discoid lupus and chronic biologic false positive tests for syphilis; all diseases or syndromes which have auto-immune features or which are known to be isolated manifestations of SLE. About 1500 sera from such patients at this medical center and from as far away as Panama and India have been studied in this laboratory during the past two years. Determinations have been made for antibodies to nuclei and to desoxyribonucleic acid (DNA) by a precise complement fixation technique, and for rheumatoid factor and gamma globulin levels.

Correlations between the serological findings and the clinical manifestations in the above cases have yielded some interesting findings. It has been observed that antinuclear antibodies, although occurring most frequently in high titre in SLE, also occur in many of those conditions listed above and infrequently in apparently normal individuals. Antinuclear antibody, therefore,

has a high index of sensitivity for SLE, but a low specificity. However, despite the high sensitivity, occasional patients with SLE and L.E. cells have lacked complement fixing antinuclear antibodies. This group of patients and sera, representing an exception to the rule, are a subject of interest in this laboratory at present.

Antibodies to DNA are seen in a low percentage of patients with SLE, but occur almost exclusively in that disease in its prolonged and active state. DNA antibodies are practically never seen in patients with diseases other than SLE. Anti-DNA antibody, therefore, has a low index of sensitivity for SLE, but a high index of specificity for the disease. Furthermore, we and others have observed that DNA antibody disappears from the serum soon after the institution of corticosteroid therapy in contrast to antinuclear antibodies which frequently persist after treatment and may persist even when the patient has gone into clinical remission and L.E. cells have disappeared. Because of the apparently high specificity of DNA antibody for SLE, all cases in our series demonstrating DNA reactivity are being assembled for further analysis and publication.

A study of the interrelationships of antinuclear and anti-DNA antibodies with the various serological reactions for syphilis has been started in this laboratory. It is well known that certain individuals with chronic biologic false positive serologic tests for syphilis eventually develop SLE. Preliminary results suggest that such individuals frequently have antinuclear antibodies long before the appearance of clinical disease. The exact relation-

ships of these globulins to those responsible for the reactions with the cardiolipin and treponemal antigens used in the diagnosis of syphilis remains to be determined. This subject has, of course, important diagnostic and epidemiological application.

The practical value of serological determinations of antinuclear factors in diagnosis and in epidemiological and family studies is now established. This laboratory has assisted personnel from several other institutions and laboratories in setting up the methods during the last year.

Certain sera of very special interest have been studied in more depth in this laboratory during the past year. One of these was from a unique patient with myasthenia gravis and thymoma who developed a syndrome consistent with lupus nephritis. It was found that this serum contained high titers of antinuclear and anti-DNA antibodies. By fluorescent antibody techniques gamma globulin from this serum combined diffusely with cell nuclei with concentration at the nuclear membrane, but failed to combine with the nucleolus. It was noted unexpectedly that this serum fixed complement with ribonucleic acid (RNA) as well as with DNA. This has not been reported previously with human serum, and preliminary evidence suggests that it is due to reaction with small contaminating amounts of DNA in the RNA used as antigen, although alternate explanations remain possible. The observations made on this most interesting case, among the earliest to be reported linking myasthenia gravis and diseases of the thymus with SLE, have been submitted with Dr. Howard Goldin to two medical meetings during 1963. Other sera

of very special interest are currently under study in the hope of shedding more light on the nature of the diseases of connective tissue and auto-immunity.

E. LABORATORY FOR STUDY OF COLLAGEN — Sidney Rothbard, M.D. and Robert F. Watson, M.D.

EXPERIMENTAL STUDIES ON RHEUMATIC FEVER AND OTHER CONNECTIVE TISSUE DISEASES:

Studies to determine whether and to what degree collagen exhibits species specificity have been almost completed during the past year. Rabbit antisera to rat, mouse, guinea pig, chicken, fish, and human collagens have been prepared for use in complement fixation and in vivo and in vitro fluorescent antibody methods. These antisera have also been absorbed with homologous and heterologous collagens further to determine the pattern of specificity of each of these collagens.

By complement fixation, rat and mouse collagens are indistinguishable, and antibodies to both show partial cross-reaction with guinea pig collagen. Fish collagen reacts only with the homologous antibody. Antibody to chicken collagen cross-reacts slightly with human skin collagen, but not with rat, mouse, guinea pig or fish. However, antibody to human collagen cross reacts with chicken and slightly with rat, but not fish, mouse or guinea pig collagens. Since rabbit anti-guinea pig collagen

serum is anti-complementary, it cannot be tested by this method.

When rabbit serum containing antibody to rat, mouse, guinea pig, or human collagen is injected into rats, the antibody is fixed in the renal glomeruli and was detected in tissue sections by the application of fluorescent antibody. The antibody was also found in the connective tissue of the spleen and, to a lesser extent, of the liver; other organs were not examined. In mice, antibody to either rat or mouse collagen fixes to the same extent. In guinea pigs, antibody to rat or mouse collagen is fixed, but the degree of fixation appeared to be less than with homologous antibody to guinea pig collagen. In chickens injected antibody to chicken collagen was fixed strongly in the renal glomeruli, liver and spleen whereas injected antibody to fish collagen was not observed in the rat or guinea pig tissues.

Sera containing antibodies to rat or guinea pig collagens were absorbed with the homologous or heterologous antigens and then injected into both rats and guinea pigs. Homologous absorption of each serum completely removed antibody when tested with either animal. However, absorption of anti-guinea pig collagen serum with rat collagen did not completely remove antibody when tested in either rats or guinea pigs. But the reverse experiment, i.e., absorption of anti-rat collagen serum with guinea pig collagen, resulted in removal of detectable antibody when the serum was injected into guinea pigs, but not when injected into rats.

In additional studies purified re-constituted collagen fibers

were treated in vitro serially with antibody to collagen and then the anti-rabbit globulin conjugated with fluorescein. Of the collagens tested, rat, mouse, guinea pig, human, chicken, and fish, only the fish appeared to be distinct; others showed reciprocal cross-reactions.

The pattern of immunological differences in serological specificity of collagens seems to be most clearly brought out by complement fixation. By this method and by both fluorescent antibody tests, fish collagen is distinctly different from chicken and mammalian collagens used. Human collagen seems to have immunologic properties in common with chicken and very slightly with rat. These findings not only extend our knowledge of the properties of collagen but also may find application in studies on organ and tissue transplantation. The availability of antibody to human collagen now permits investigation of specific lesions in rheumatic fever, such as the subcutaneous nodule in connective tissue and the Aschoff body in the myocardium.

F. LABORATORY OF ULTRASTRUCTURAL BIOCHEMISTRY — Aaron S. Posner, Ph.D. and E. D. Eanes, Ph.D.

The major emphasis during this calendar year has been on the studies of the crystal morphology of bone apatite. X-ray diffraction studies have been carried out on the effect of age and disease on the size and perfection of the crystals in bone mineral. Studies on laboratory rat bones have shown there is

a rapid crystal growth in the first forty days of age followed by very little growth up to three hundred days of age. In human studies, bones from Paget's patients have been shown to contain very small and/or imperfect apatite.

Concomitant studies on the effect of fluoride on rat and human bones have shown that the ingestion of fluoride results in bone apatite crystal growth. Heretofore, it was not known whether laboratory rats could tolerate fluoride when less than forty days of age. Experiments have shown that rats can be injected intraperitoneally at the level of 0.22 mg of NaF per day at two days of age with no apparent physiological effect. A daily injection at this rate for sixteen days resulted in fluorine incorporation in the femurs and ribs at 0.2% (on an ash basis), a surprisingly high level for such a short treatment. Although this series of experiments is still being carried on, it can be said that the appearance of fluoride in young rat bone (below twenty days of age) is not necessarily accompanied by crystal growth. Apparently a certain amount of bone turnover, perhaps due to age, seems needed before the fluoride effects a crystal growth.

Studies were also made on the methods for synthesizing various calcium phosphates related to hard tissue mineral. The synthetic products were analyzed chemically and subjected to infra-red and x-ray studies. Along with the x-ray diffraction studies a good deal of work has been done (in collaboration with the Physics Department of the Georgia Institute of Technology, Atlanta) on neutron diffraction by synthetic and mineral calcium phosphates. This neutron data is yielding information on

the location of the hydrogen ion in pure hydroxyapatite, $\text{Ca}_{10}(\text{PO}_4)_6(\text{OH})_2$. In addition, a refinement of the fluorapatite structure, $\text{Ca}_{10}(\text{PO}_4)_6\text{F}_2$, is being carried out with x-ray diffraction data. The aim of this work is to compare the exact location of atoms near the hydroxyl (OH) and fluoride (F) ions in hydroxyapatite and fluorapatite, respectively. The ingested fluoride has been shown in the above x-ray study, to substitute for hydroxyl in bone apatite, resulting in a more stable compound. In fact, as low as ten percent replacement of hydroxyl by fluoride provides stabilization of tooth mineral against caries. The effect of fluoride ingestion on tooth and bone mineral will be better understood when this problem in atomic architecture (i.e., 3-dimensional arrangement of atoms) is resolved.

This group received a seven year Program Project Grant from the National Institute of Health (Grant No. DE-01945), starting September 1, 1963, to carry on a broad interdisciplinary research program on the ultrastructure of hard tissue.

G. LABORATORY FOR STUDY OF BONE METABOLISM — Paul D. Saville, M.D.

This laboratory started its activities in July 1963 when Dr. Paul D. Saville became a full time member of the staff of the hospital. At first located on the fourth floor, the laboratory moved to permanent quarters on the fifth floor in February 1964.

HUMAN STUDIES

1. Paget's Disease: Three patients suffering from localized Paget's disease were given Strontium 85 by intravenous injection. External counting over the affected bone showed uptake of 5 to 10 times that of normal. The administration of fluoride for three to five months and a repeat study after this time revealed exactly the same percentage uptake of Strontium 85 in the Paget's bone. In view of this and of a review of the published reports on fluoride in Paget's disease and of other conditions so far, it is not proposed to extend this project into a major study.

2. Osteogenesis imperfecta: Two adults suffering from Osteogenesis Imperfecta were given calcium 45, pool size and bone formation rate were measured. A similar study was made following various modalities of treatment with the view of finding a useful means of treating this disorder. Two children were also studied. However, urinary excretion of hydroxyproline was measured, first before treatment and later following treatment. Results are incomplete at the present time, but it is felt that the urinary excretion of hydroxyproline on a hydroxyproline free diet may prove to be a useful measure of collagen turnover.

3. Osteoporosis: Biopsies are being taken from the iliac crest of patients who have sustained fractured neck of the femur. These biopsies will be defatted, weighed and compared to control specimens obtained from normal cadavers.

A study has been started with the object of measuring changes in a clinical radiograph of the elbow and comparing and relating these changes to direct measurements of the porosity of the spine and ribs as well as the iliac crest. The primary object of this work is to establish a simple means of evaluating decreased bone density of the spine by measuring another parameter such as iliac crest biopsy or radiograph of the elbow.

ANIMAL STUDIES

1. The femoral and sciatic nerve of rats were avulsed in one hind limb. The mass of muscle and bone lost in the affected limb compared with the control side was measured over a period of time in different groups of animals. It was found as expected that muscle mass and bone mass decreased with time, however, the muscle mass decreased to a maximum of 40% over a period of 56 days, while loss of bone amounted to about 10% over a period of 28 days after which no further decrease occurred. It is concluded that loss of muscle and loss of bone from paralyzed limbs are not directly related one to another contrary to general supposition.

2. The hind limbs of a group of rats were paralyzed by avulsion of femoral and sciatic nerve. Three weeks later the animals were put on metabolic balance study and given injection of calcium 45. Combined kinetic and balance studies were then made. It was found that bone formation rate, bone resorption rate and pool size did not differ in the experimental and control

animals. The reason for this was that the loss of calcium amounted to no more than half of one percent of the total body calcium and could not be demonstrated by these techniques.

3. It is now planned to try to section the anterior root of the hind limbs of rabbits or cats with the object of producing a pure motor paralysis without sensory or sympathetic paralysis. Dr. Kharmosh is working on the technical side of performing these operations. Further experiments will be done to evaluate the effects of motor paralysis on muscle and bone in a larger animal than the rat so that better measurement can be made on changes in bone mass, marrow volume, etc.

H. MASSIVE BONE TRANSPLANTS IN DOGS—Pedro Bacalao, M.D.

The studies initiated late in November of 1962 have been continued through 1963. Seventy-seven large graft specimens consisting of the lower half of the femur, including the articular surface, have been prepared according to the macerating technique proposed by Maatz and Bauermeister, using hydrogen peroxide. Sixty-seven dogs have been operated on having the lower half of the femur removed and replaced by the prepared graft. Evaluation of the results at twelve, six and three months post-operative is in progress.

GUEST SPEAKERS AT RESEARCH SEMINARS — 1963

Date	Speaker	Title
Jan. 10	Gilbert Gordan, M.D. Univ. of California San Francisco	Endocrine Treatment of Osteoporosis
Jan. 17	Larry Raisz, M.D. University of Rochester Medical School	Regulation of Parathyroid Function in Organ Culture
Feb. 14	Ernest Schwartz, M.D. Bronx Veterans Administration Hospital, New York	Treatment of Osteoporosis. Analysis of high calcium intake and hormone therapy
March 14	B.E.C. Nordin, M.D. Univ. of Glasgow, Scotland	The Diagnosis and Treatment of Osteoporosis
March 25	George R. Martin, Ph.D. National Institutes of Dental Research, Bethesda, Maryland	On the Relation of Collagen Structure to the Molecular Defect in Lathyrism
April 22	M. J. Purves, M.D. University of Cambridge, England	Effect of Fluoridation on Paget's Disease
May 9	O. Dhodanand Kowlessar, M.D. Seton Hall College of Medicine Jersey City, N.J.	Hydroxyproline in Metabolic Bone Disease
May 10	Kirk J. Anderson, M.D. and James A. Dingwall, M.D. University of Washington, Seattle, Washington	The Processed Bone Heterograft. A Six-Year Study
May 17	Fred Gornick, Ph.D. National Bureau of Standards Washington, D.C.	Evidence for a Configurational Transition in the Synthetic Polypeptide Poly-L-Proline
June 19	Clive C. Solomons, Ph.D. McGill University Montreal, Canada	Studies on Organic Matrix of Bone
June 28	Alf L. Nachemson, M.D. University of Gothenberg, Sweden	Biomechanical Aspects of Low Back Pain, Measurements in vivo of intervertebral disc pressure
October 10	David S. Howell, M.D. University of Miami, Florida	A Biophysical study of sulfur metabolism in calcification of cartilage and osteoid
October 11	Gunnar Bauer, M.D. University of Lund, Sweden	Thrombosis and Post-thrombotic sequela
November 13	Marian Weis, M.D. University of Warsaw, Poland	The Present Status of Orthopaedics and Rehabilitation in Eastern Europe
November 14	Howard G. Worthen, MD, PhD Cornell Univ., Med. College	Rickets and Ricketoid Conditions
November 21	Sten-Erik Olsson, DVM, MD Royal Veterinary College Stockholm, Sweden	Orthopaedic Problems in Animals
December 5	Kauko Vainio, M.D. Heinola, Finland	Surgery of Rheumatoid Arthritis

REPORT OF THE DIRECTOR

It is indeed a rare privilege for any hospital administrator to submit an annual report for the final year of a century of operations. I am so honored this year.

Twelve months ago I closed my report with the words spoken by Wilson Mizner, "life's a tough proposition but the first hundred years are the hardest." Little did I realize how true this statement would be. In 1963 the Hospital experienced the largest operating deficit in one hundred years of operations showing a loss of \$556,000 (excluding depreciation). The only year which approached this figure was 1959 which had an operating loss of \$425,000. This past year's loss was caused by two contributory factors — a decrease of 2700 patient days and a 16½ increase in salaries and expenses. As a side note here, in the first annual report submitted in 1864, the Hospital experienced a gain of \$1,616 in its first year of operation.

STAFF CHANGES

At the start of the year, Mr. John Baer replaced Mr. Warren Betts as Assistant Director and Mrs. Rose Cronin came to us as Executive Housekeeper, replacing Mrs. Adelaide Maloney. Both are excellent additions to our staff.

A number of the Hospital's most loyal and dedicated employees chose the Hospital's centennial year to retire. Seven employees, averaging 22½ years of service, retired. They were:

1. Mr. Daniel Bohleber, Assistant Purchasing Agent
2. Mrs. Bella Campbell, Cafeteria Supervisor

3. Mrs. Irene Landry, Anesthetist
4. Mrs. Adelaide Maloney, Executive Housekeeper
5. Miss Marion Porteous, Recovery Room Supervisor
6. Miss Dorothy Short, Night Supervisor
7. Miss Jessie Wright, Information Clerk

PERSONNEL RELATIONS

The Hospital for Special Surgery moved ahead in the area of personnel relations during the year of 1963, thereby continuing to maintain our high standards of Employee benefits.

1. On June 30, 1963 the hospital minimum wage was increased to \$1.60 an hour which makes us the second in the voluntary group in New York.

2. Our revised 65-year retirement age pension plan became effective.

3. A \$3,000 non-contributory insurance plan became effective.

4. Our entire payroll system was converted from bi-weekly to weekly.

5. We completed a 26 week management development program.

RENOVATION OF PLANT

The continuing cry for more space and improvement in operating efficiency necessitated many plant changes in 1963.

1. We added one additional x-ray examination room.

2. Built new office suites for Dr. Bauer on the fifth floor of the research building.
3. Redesigned accounting and admitting offices.
4. Installed direct dialing in patient rooms.
5. Installed new and more efficient lighting in private street in front of hospital.

MISCELLANEOUS

In November the joint commission on accreditation of hospitals made an inspection of our hospital. We were accredited for a period of three years or until a subsequent survey is conducted.

CENTENNIAL WEEK

May 1, 1963, the one hundredth birthday of the hospital, marked the beginning of our own version of "That Was The Week That Was". I am sure it was a week that will be remembered for at least the next one hundred years.

The centennial dinner at the Waldorf, Alumni day, the scientific conferences, the employee birthday luncheon, the annual hospital dance at the Essex House — these were but the highlights of our week of celebration.

Many old and dear friends came from near and far to share in the social activities and the scientific programs and to view for the first time the elaborate centennial display which graphically illustrated the outstanding events in the history of our insti-

tution. This display has traveled to many important locations in the city and has been seen by a countless number of people.

The centennial celebration gave us reason to pause and reflect on the past successful one hundred years of dedicated, appreciated and needed service to humanity. It presented an opportunity to note that the fruits of our collective efforts have been observed from coast to coast and from continent to continent. Perhaps more important, the centennial provided the stimulus for each of us to work just a little bit harder so that our second century will be equal to, if not greater than, our first.

DEATHS

It is always the saddest part of the annual report to note the passing of some of our hospital family. This past year we experienced the loss of:

1. Genevieve Burke, Pensioner
2. Loretta Chater, Pensioner
3. Esther Dermady, Admitting Clerk
4. Beatrice McEwan, Pensioner
5. André Pillot, Advisory Council

CONCLUSION

Today as we close the books on the first century of operations we can take pride in the achievements of those present and

those who have gone before. We must, however, turn our thoughts to a new century of operations where we stand poised at the threshold of the space age with its scientific and medical potential offering a challenge to us not too dissimilar from that faced by our courageous founders, who, upon the advent of the new venture, reported in 1863 as follows:

“This being the first, and as yet the only institution in the country, that is exclusively devoted to the treatment of the ruptured and crippled, and others suffering from analogous diseases, considerable interest is felt by the benevolent public in the success of its labors. The society having been but one year in operation, it has had to encounter the difficulties usually inseparable from a new enterprise: and it is still but imperfectly known, especially among the classes it was meant to benefit. . . .

“... Need more be said in behalf of this new charity? If the relief of individual suffering — the removal of physical disability, and the preservation of human life are among the strongest proofs of the value and efficiency of agencies and efforts for the temporal welfare of mankind, then this society is entitled to the earnest cooperation and liberal support of the wisest and best in the community.”

I am sincerely grateful for the generous support that the benefactors have given the hospital over the years. This support coupled with the contributions of both the Board of Managers and our excellent medical staff has gained for the Hospital for Special Surgery the highly respected reputation that it now

enjoys. Each one of us hope that our efforts at the start of our second century of service will prove to be as rewarding to humanity as was the first. As the Director, I should like to thank you one and all.



Respectfully submitted,
T. Gordon Young
Director

REPORT OF THE DIRECTOR OF NURSING

To say that "there's nothing new under the sun" may be a slight exaggeration, but a perusal of the accomplishments of the New York Society for the Relief of the Ruptured and Crippled during its first one hundred years reveals a recurrence of situations that is truly amazing. One gets the impression that if we could step back twenty-five, fifty or seventy-five years that there would be a great familiarity with the problems if not with the actual people.

In the first hospital in Dr. Knight's home, Mrs. Knight "super-intended" the domestic arrangements until the house was sold to the Society at which time a "Warden" and a "Matron" were employed. Whatever nursing care was given during the first years, other than that from Dr. and Mrs. Knight, was from "hired domestics". The nurse shortage was really acute then for the simple reason that there were no "trained" nurses at all in this country. In 1909 there were seven trained nurses including the Matron. The first mention of a registered nurse was made in the 1916 annual report although there may have been some before that time. In 1918 there were eight graduate nurses and twenty-eight attendants. In 1922 seventeen graduates and fifty attendants; in 1926 with a bed capacity of two hundred thirty four there were twenty-eight graduates and eighty attendants. Most of these attendants were on-the-job trained employees who would today correspond to Nurses' Aides.

At the beginning of our second century of service we had fifty-eight Registered Nurses, sixty-seven Licensed Practical Nurses, and twenty-six Nurses' Aides. The demands on nursing

service have always been great, but the requirements for quality have been steadily increasing. The most crucial period for nursing was during and immediately after World War II. In his annual report for 1945, Dr. Philip D. Wilson, Sr., the Surgeon-in-Chief, wrote: "Again my particular thanks goes to Miss Logothe-ton, Director of Nursing who, it seems to me, more than any other, carried the heavy burden of trying to maintain the es-sential service in nursing."

A concern with salaries and personnel policies is evident through the years. In the light of present day rates the most interesting comment was made by Dr. Knight in 1866: "In the domestic department matters have not been quite so favorable — the help having become dissatisfied with the work and the wage given them, only one being allowed Ten Dollars a month, and some as low as Six Dollars, but at present we are tolerably well supplied."

By 1908 nurses salaries had sky-rockted to Fifty Dollars per month. This was a twelve hour day, half of the staff being al-lowed off duty every other Sunday. Gradually this twelve hour day was cut to an eight hour day but it was a "Split-shift" eight hours. Not until 1947 did the entire nursing staff go on three eight hour shifts per twenty-four hours. The personnel policies have since become more and more liberal so that not only do the "fringe benefits" compare most favorably with the best in the city, but the salaries as well. A far cry from Six Dollars per month in 1866.

The housing situation has always been a concern. In the first

hospital, Dr. Knight's own home, he and his family, the "hired domestics", and all the patients lived under one roof. The second hospital at Lexington Ave. and 42nd Street also housed all the personnel as well as the patients. For instance in 1906 we know there were two hundred seventy two people there; one hundred eighty-eight were patients and eight-four were staff. In the third hospital, "the old hospital" to many of us, practically all of the personnel "lived in" when the hospital was new. As the scope of the work increased, more wards were made at the expense of these living quarters. By 1919 a plaintive note was struck in the annual report. "We need more living room for nurses". Quarters on 43rd Street and Second Avenue eventually solved this problem. Then after the move to 70th Street we still had housing headaches. So far these have been remedied first by the acquisition of two remodeled brownstones on 77th Street in 1959 and by leasing twelve new apartments at the end of 1963.

Even the move from 42nd Street to 70th Street and our new (the fourth) hospital was not without precedent. It is noted: "On November 29, 1912 the patients had their mid-day meal in the old building on 42nd Street and Lexington Avenue, and their evening meal in their new quarters." In the annual report for 1955 the Director, Mr. T. Gordon Young reported: "On May 25, 1955, the big event of the year, "Manhattan Transfer," took place. Exceeding the expectations of the most optimistic, all patients, numbering seventy-three, were installed in our new hospital for lunch. The entire patient move was accomplished in

less than two and a half hours. Months and months of planning of what and how to move made moving day itself seem simple."

Interest in and promotion of medical education has by tradition been one of the most important products of our institution from the days of Dr. Knight, Dr. Gibney and their successors. In fact if some of our residents, cringing under the caustic comments of some of the Attendings who conduct our Tuesday and Thursday morning conferences, but knew it, Dr. Virgil Gibney was the master without equal, in this method of pointing out deficiencies in information.

Being a specialty hospital general nursing education has not been one of our strengths. In 1924 Dr. William B. Coley, Surgeon-in-Chief, mentioned that a course of lectures was to be given by the staff to the nurses' attendants who "have not had the advantages of a training school education." Today we would call it "in-service." In 1925 Dr. Coley said, "Splendid work has been done by our Nursing Department, and this in spite of the great handicap of not having a Training School for Nurses." Dr. Coley would be glad to know that something was eventually done to meet this situation.

During World War II when the ranks of the Nursing Department were so terribly depleted, Miss Cleanthe Logotheton organized a six month Senior Cadet Program for students in diploma nursing programs. In addition the hospital offered a post-graduate program in Orthopedic Nursing for registered nurses. These two programs plus refresher course for nurses coming back into practice during wartime and in-service classes for Red Cross

Nurses' Aides made the difference between catastrophe and survival.

Then in 1955 with approval of the State Education Department the first class of the Hospital for Special Surgery School of Practical Nursing was admitted under the leadership of our Director of Nursing Education, Miss Dean Smith. The School flourished from the start. We now admit three classes of thirty students each year. To date we have graduated three hundred and eighty practical nurses, sixty-nine of them in 1963. In addition, since our proximal affiliation with Cornell Medical Center we have had students in the Cornell University—New York Hospital School of Nursing affiliating for four week periods for orthopedics. Unfortunately, this program will close in 1964 due to their shortened curriculum.

In October 1963 we began an affiliation in orthopedic nursing and long-term illness with the Mary Immaculate Hospital School of Nursing. From ten to twelve students in a group are here for eight weeks at a time.

Each June we have nursing students at the Masters' level from Teachers College, Columbia University.

Antioch College sends us young college students for three month periods who are employed as Nurses' Aides or Orderlies and who require a good bit of instruction to function safely and adequately.

In 1963 we received our accreditation by the National Association for Practical Nurse Education and Service for our three month training course given to licensed practical nurses to be-

come Surgical Technicians. Ours is the only such accredited program on the East Coast.

All these programs in addition to the in-service programs for our own nursing personnel keep our faculty, which has grown from one to seven full-time members since 1955, very busy. I believe Dr. Coley would be quite impressed.

There is only one occurrence in the history of this institution which seems fortunately not to have been repeated. Dr. Knight reported in 1898 a disastrous fire which consumed a whole wing of the hospital and caused the death by suffocation of a sleeping cook which had been caused by a two year old pyromaniac's "insane love of matches." Today we have a fire-retardant building and a Safety Committee.

It is a great privilege to be associated with an institution which has produced such miracles in patient management, such giants in medical science, and such devotion to duty as seen in her staff.

To the following ladies I acknowledge my tremendous admiration:

Mrs. James Knight

Miss Jean England

Mrs. Sarah Carey

Miss Josephine Hughes

Mrs. E. Valentine

Miss Ethel B. Ridley

Mrs. Ella S. Murdock

Mrs. Bertha Pieraccini

Miss Ella Patterson

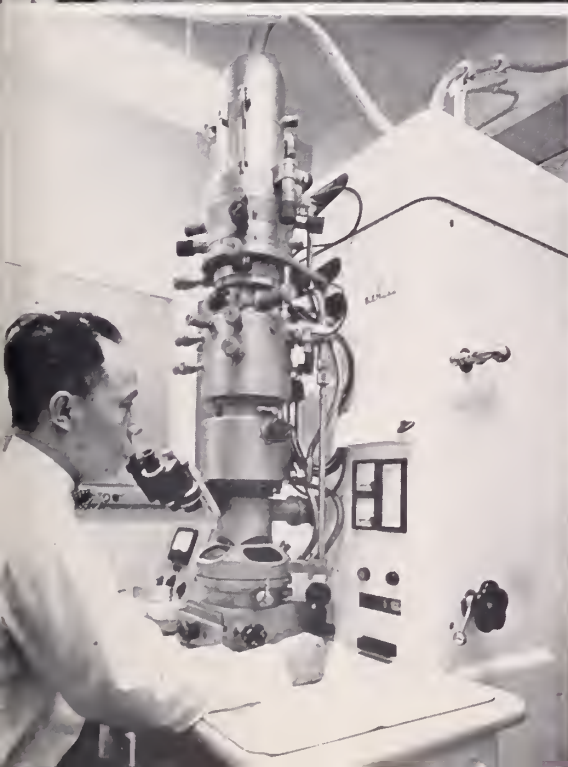
Miss Cleanthe Logotheton

Whether known as Matron, Directress of Nursing, or Director of Nursing Service, they too can be given some of the credit for this great institution which is now starting on its second century.



Respectfully submitted,
Mary Janne Clapp, R.N.
Director of Nursing

1. Dr. Philip D. Wilson subjects a bone to controlled mechanical stress. 2. Physical therapy is an important part of recovery—over 34,000 treatments were given in 1963. 3. The rat is one of the scientists most useful animals in experimentation. 4. The electron microscope is invaluable in making biological specimens, less than one micron in diameter, clear to the investigator. 5. Research is a never-ending function of a medical center.



REPORT OF THE DIRECTOR OF SOCIAL SERVICE

THE STAFF

Nineteen hundred and sixty-three has been a banner year from the standpoint of staff. There have been only a few staff changes and the intervals between resignations and replacements have been brief. Ruth Hillebrand, Case Aide in the Cerebral Palsy Service, resigned in June and Lee Cauley, University of Vermont, class of 1963, accepted the position. The previous summer Miss Cauley had been one of our College Case Aides sponsored by the Social Work Recruiting Center of Greater New York. In July, Alcee Speyer who had just received her Master's Degree from The Columbia University School of Social Work was appointed as the Children's Ward Worker. Miss Speyer was the first recipient of our newly established Social Work Scholarship. In November, Elaine Sullum, social worker in the Multiple Sclerosis Service resigned to accept another position, since plans for this Service did not require the full-time services of a social worker. We were fortunate indeed to persuade Lois Racz who had previously been a member of the Social Service Department to accept this half-time assignment.

SOCIAL WORK IN THE CLINICS

Recently one of our orthopedic surgeons asked for an outline of the social workers' function in the Out-Patient Department of Special Surgery. The field work supervisor from one of the graduate schools of social work, whose experience had been chiefly in family agencies, requested the same information. So, in this

annual report it seems appropriate to describe briefly what the medical social worker does in the clinics of Special Surgery.

In four clinics, namely the Club Foot Clinic, Cerebral Palsy, Multiple Sclerosis, and Poliomyelitis, Social Service has 100% coverage. A social worker is assigned to all other clinics and is available for referrals by the physicians. Referrals to Social Service are also accepted from other members of the Hospital personnel and from outside social agencies. Many patients are self-referred.

Some of the social worker's functions are of a direct nature such as helping the patient secure appliances or special shoes, arranging for home instruction for a child who cannot attend regular school, or planning for convalescence, or for Nursing Home care. However, the medical social worker's primary responsibility is to ascertain, evaluate and share with the patient's physician any personal or family problems which disturb the patient or may hinder his best response to the medical plan. It is the social worker's function to help the patient understand and solve his difficulty or at least control and lessen it. This is accomplished by what is termed, "social casework."

A social worker must be informed of the resources of other agencies in the community. She is the link between the hospital and outside resources which may contribute material assistance, family guidance, vocational counselling or other special services for the patient and his family. In general, through the knowledge of the social factors in a sickness situation and the use of resources within the hospital, within the patient himself.

his family and the community, the medical social worker contributes to the physician's total care of the patient.

COLLEGE CASE AIDE

For the eighth consecutive summer our Department accepted a college student recommended by the Social Work Recruiting Center of Greater New York for an experience in social work. Caroline Morris, Vassar 1965, was in our Department for a period of eight weeks. The Gift Shop contributed \$500 to pay her stipend for living expenses.

GRADUATE STUDENTS

During the spring semester of 1963 Rita Gazarik, first year graduate student from Fordham University School of Social Work, was assigned to our Department for field work experience and was supervised by Margaret L. Roby. In the fall of 1963 Fordham University assigned Patricia Keenan, also a first year graduate student, for field work and again Miss Roby accepted the responsibility. Both young women were satisfactory students and both showed promise of being successful in their chosen career of social work. Frederick Rothenberg, second year graduate student from the School of Social Work, New York University also came to us in early October for field work. Patricia Adler, chief social worker in the Cerebral Palsy Service, was appointed to supervise his program. Mr. Rothenberg was our first contact with the New York University School of Social

Work. We have had previous affiliations with Columbia University, Hunter College, and Fordham University Schools of Social Work. Since 1940, with the exception of one year, our Department has had two students each academic year for field work supervision.

STAFF MEETINGS

During ten months of the year staff meetings are held regularly on the second and fourth Monday of each month. The members of the Committee on Agenda for Staff Meetings for 1963-64 are Roberta Schofield, Chairman, Patricia Adler and Alcee Speyer. This Committee has planned an interesting and comprehensive program consisting of case presentations of various staff members, with occasional guest speakers. These staff meetings also give the Director of Social Service an opportunity to discuss with the staff current developments in the field of social work, new directives and policies. Two guest speakers during the fall of 1963 were Miss Marguerite Lohrer, Consultant in Public Health and Social Work, New York City Department of Health and Miss Fanchette Schwartz, Recreation Director of Special Surgery. We have welcomed several members of our Social Service Committee, who expressed an interest in attending the staff meetings.

DESIGNATED FUNDS

Our Department acknowledges with deep gratitude the many generous gifts and contributions which maintain our designated

funds and make it possible to provide assistance that patients need but cannot afford with today's increased prices cutting into their meager incomes. Modern medications are expensive and transportation charges for patients who cannot manage subway or bus steps are heavy, especially if one travels from the upper Bronx or from the far stretches of Brooklyn.

No child is ever turned away from Special Surgery without the help he needs just because his parents cannot afford to carry out the doctor's orders for medical care. In accordance with their ability to do so, parents are usually eager to participate in a plan for full or partial payment. We have a very useful loan closet for crutches and for wheelchairs so these necessary articles may be loaned free of charge to patients. When necessary, the wheelchairs are repaired and carefully maintained at the expense of our transportation fund. If a patient will require a wheelchair for more than two months, the social worker takes steps to secure one which the patient may have for his own indefinitely.

CAMPING

The summer camping program in 1963 owed much of its success to the enthusiastic cooperation of members of our Social Service Committee, who completed numerous camp applications, wrote dozens of letters and cards to patients, and assisted Dr. Bernard Rogoff in the seven special clinics that were held for camp health examinations. On the day of departure for the Southampton Fresh Air Home, they took charge of the final

check-up, served luncheon and handed fifty-six hilarious little boys and girls into the air-conditioned bus that was to take them to the seashore for two wonderful months.

More seriously handicapped and older children were sent to eighteen other camps, sponsored by fifteen different agencies, who generously accepted our campers at free or reduced rates, or on "scholarships." A total of 180 campers enjoyed summer vacations — 160 children, 17 teen-agers and young adults and 3 multiple sclerosis patients.

We are very grateful to the Walter Scott Foundation, which assists our Department generously throughout the entire year, for their special gift of \$1150.00 for summer camping.

We are convinced that summer camping is a wonderfully worth while experience for every handicapped child, and is a valuable asset in the total picture of rehabilitation. Camping opens up many new doors for a child whose activities have been restricted; it develops new facilities and skills, stimulates him to become more independent, overcome shyness, acquire a measure of self-confidence and learn how to make and enjoy the friendship of others.

THE SUE GOLDING SOCIAL WORK SCHOLARSHIP

Our first scholarship recipient, Alcee Speyer has demonstrated in a highly satisfactory manner that our Sue Golding Social Work Scholarship is of inestimable value to the Social Service Department. She has carried full responsibility for social work to the Children's Ward Service in a well-organized, profes-

sional manner which has won the approval of all with whom she has been associated. We could not ask for a more propitious beginning of this important new project.

Frederic Rothenberg who is presently assigned to the Cerebral Palsy Service for supervised field work experience, was selected as our second Scholarship recipient.

OBJECTIVE FOR 1964 — A CASE WORK SUPERVISOR

In order to perfect and expand the work of our Social Service Department, especially along the lines of intensive social case work, we need an experienced Case Work Supervisor, who would also function as Assistant Director of the Department.

There is general agreement in the area of social work, that a Case Work Supervisor is essential for the supervision of every seven social workers. At present, we have eight medical social workers and two case aides. New staff members require considerable supervision, for there are many hospital procedures and policies about which they must be informed. However, the entire staff benefits from continued supervision, for it is a stimulus to on-the-job learning, and to a sustained level of superior performance. Even a very good social worker may become somewhat blasé or discouraged about her job if she lacks supervision. The Director of a Social Service Department must find time to supervise the newcomers to the staff, but because of the administrative pressures of her position, finds it difficult to be readily available to the entire staff for adequate discus-

sion of problem situations which engage the social worker's attention and challenge her skills as a case worker.

The social workers of Special Surgery have more or less contact with all other departments of the hospital. They appreciate the splendid cooperation they invariably receive, for everyone is ready to help us help the patients. We are especially grateful to Dr. Robert Lee Patterson, Surgeon-in-Chief, for his interest and understanding, to Mr. T. Gordon Young, our Administrator, for his sound advice and generous assistance, to Mrs. Walter J. Fried, the efficient Chairman of the Women's Auxiliary, and to our enthusiastic and hard-working Social Service Committee.



Respectfully submitted,
Glee H. Dervend
Director of Social Service

REPORT OF THE CHAIRMAN OF THE WOMEN'S AUXILIARY

The year 1963, which marked our Hospital's 100th birthday, was one of renewed dedication and endeavour for the members of the Women's Auxiliary.

We all worked hard in the United Hospital Fund campaign, in which our group distinguished itself, under the leadership of Mrs. Hoepli, by obtaining the highest number of new gifts for any Manhattan Hospital. Our coin box total was impressive, thanks to the efforts of Mrs. William Arnold.

In March seven auxiliary members acted as hostesses at a tour of the Hospital and lunch for twenty-five wives of United Nations personnel. The occasion, which was sponsored by the National Council of Women, proved a great success. Our guests from many countries showed much interest in the Hospital, and particularly in its volunteer program. We now have an Indian volunteer who proudly wears the insignia on her blue sari.

We are working, as in former years, with Mrs. Hilson and her Committee, to assure the success of our benefit, and look forward to the Celestial Gala in April.

Volunteers — Mrs. Philip D. Wilson, Chairman

The annual awards meeting of the volunteers was changed in 1963 from a tea to a lunch. This was a welcome innovation, and we thank Mrs. Goldstone and the chef for producing a delicious and beautiful buffet. Sherry was donated, and the awards were the gift of a volunteer who wished to remain anonymous.

The number of junior volunteer hours was smaller this

summer because we limited the size of the group to include only those who could effectively be trained and supervised. What was lost in quantity was gained in quality.

This has been a satisfactory year, with many new positions open to the volunteer in the Hospital.

During 1963, 134 volunteers contributed 19,894 hours.

Patients' Library — Mrs. Charles C. Bannerman, Chairman

The library submits a separate report. As Auxiliary Chairman, I would like to congratulate Mrs. Bannerman on her dedicated and imaginative leadership of the Library Committee.

**United Hospital Fund — Mrs. M. Henry Hoepli, Drive Chairman
Mrs. William Arnold, Box Week Chairman**

Total contributions for the year amounted to \$15,038.31, representing 624 gifts. The box week total was \$1,966.73.

Social Service Committee—Mrs. Newcomb D. Cole, Chairman

The second recipient of the Sue Golding Scholarship Fund is Mr. Fred Rothenberg, who is a second year graduate student in social work at New York University. His field work is being done at the Hospital for Special Surgery.

The Committee has again assisted with the children's camping project, and our thanks go to Dr. Bernard Rogoff for the time and skill he gives to the physical examinations of our campers.

Three of our members were on the "Joint Committee on Nursing Homes of The Community Council and the United Hospital Fund." Mrs. Newcomb D. Cole is its chairman.

Membership Committee — Mrs. John Rutherford, Chairman

There are forty-three members of the Auxiliary, thirty-three active, two professional, and eight contributing. Four members resigned in 1963—Mrs. Bethnel Webster, Mrs. Robert Deboise, Mrs. Louis Owens and Miss Elisabeth Remsen. We miss them greatly but look forward to welcoming three new members early in 1964.

Gift Shop — Mrs. John H. Reynolds, Chairman

The gift shop has again enjoyed a successful year.

Annual Report of the Gift Shop

Cash receipts for the year 1963	\$35,569.20
Operating expenses	30,932.32
Profit	<hr/> \$ 4,636.88
12/31/63 Cash Balance in Chemical Bank New York Trust Co.	\$ 8,023.27

Occupational Therapy — Mrs. David Reuter, Chairman

Mrs. Reuter was appointed chairman of the United Hospital Fund Occupational Therapy Committee and has again served on

the Advisory Committee for volunteer training. She is a member of the Women's Executive Committee of the United Hospital Fund.

The Department has trained four students from New York University, and has had the assistance of a Columbia University undergraduate during the summer to help with secretarial work.

The Christmas sale netted \$725.68, and the balance on hand on December 31st was \$1,333.46.

2,363 treatments were given to 260 patients.

Treasurer's Report — Mrs. Harold C. Richard

STATEMENT OF CASH RECEIPTS AND CASH DISBURSEMENTS FOR THE YEAR ENDED DECEMBER 1, 1963

Cash Balance — January 1, 1963	\$17,054.06
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Receipts:

Receipts from Charitable Organizations and Individuals for Designated Purposes	\$ 5,136.02	
United Hospital Fund	14,946.00	
Greater New York Fund	5,366.00	
Refunds from Patients	146.67	
Dues Received	540.00	
Interest on Savings Account	153.21	
From Hospital Gift Shop — For College Case Aide Salaries	480.00	
Total Receipts		26,767.90
Total Cash		<u>\$43,821.96</u>

DISBURSEMENTS:

Salaries	\$15,000.00
Office Expense	1,744.28
College Case Aide Salary	480.00
For Nursing Student Loan Fund	100.00
Expenses of Professional Staff	59.09
Medical Relief	5,010.14
Convalescent Care	104.75
Summer Therapeutic Care	1,749.60
General Transportation of Patients	465.50
Recreation of Patients	74.00
Library	600.00
	<hr/>
TOTAL DISBURSEMENTS	25,387.36
Cash Balance — December 31, 1963	<hr/> <u>\$18,434.60</u>

In conclusion, I want to thank the members of the Auxiliary for their enthusiasm and support during the past year, Mrs. Dervend for her wise counsel, and Mr. Young for his unfailing interest in our projects.



Respectfully submitted,
Brita Digby Fried,
Chairman

REPORT OF THE ALKER MEMORIAL LIBRARY AND THE MAY AVENTS AVERILL LIBRARY FOR CHILDREN

An expert and willing group made it "business as usual" for the Library in 1963—except for the month of August which found us without sufficient trained volunteers, an unprecedented happening with this particular volunteer group. Our two fine librarians, however, accommodated with their usual exchange of service so that we were continually staffed for the other eleven months. There is no way of expressing how much these two workers mean to the Chairman, and therefore to the patients and staff, because of their ability and experience, and exceptional personalities.

There were the usual assorted travels causing occasional absenteeism, and there were a few changes in personnel. Mrs. Watkins and Mrs. Bannerman, Co-Chairmen, went on trips; Mrs. Debevoise, who is greatly missed in more than one department of the Hospital, resigned to take up residence in Williamstown, Mass.; and Mrs. Bullock and Mrs. Ireland had to give up the work because of other duties. Mrs. Carl Fowler came as a new volunteer and started working in November. Mrs. Wilson suffered a grievous personal tragedy in the loss of her husband. The volunteer group combined to send a contribution to the Nantucket Athenaeum in memory of Mr. Wilson.

Although our doors were closed for the month of August, Mrs. Cole and Miss Yerkes volunteered to reorganize our shelves and get the books in good order for the winter business. Never a doubt, you see, that the show will go on, whether manned by two workers or ten.

Exhibitions of art work were held from time to time—ceramic

birds by Ann Bannerman, paintings by Viola Baer, paintings and drawings by Yolande Huber. Miss Bannerman is the daughter of the Library Chairman, Mrs. Baer is the mother of the Assistant Director, and Dr. Huber was long on our staff as a plastic surgeon. We feel that these extra-curricular activities add interest to the life of the Library and help to bring a bit of the outside world into the Hospital. The usual book sales were held in the Spring and Fall, netting \$386.00. Also a sale of rare and unusual volumes brought additional funds toward the purchase of usable books. Several gifts were received as well, and where possible, were put to use for items of practical purpose. Bed reading stands and Bedspecs had increased circulation, and the Hospital has contributed a magazine stand toward a more orderly maintenance of magazines in the Clinic.

The circulation figures—meaningless to many—show that we give out an average of 200 or so on each library day, or over 1 6 of all the books and magazines in the Library each month. This despite radio, television, visitors, and treatment. "There is no frigate like a book to take us lands away." Away from awareness of pain, we hope.



Respectfully submitted,
Jane Campbell Bannerman,
Chairman

BOOKS AND MAGAZINES BORROWED:

Adult	7,630
Children	4,644
Staff	4,909
Total	17,183

Adults Served	3,744
Children Served	1,519
Staff Served	2,816
Total	8,079

Books Added	488
Books Withdrawn	416
Total Book Stock	6,180
Volunteers	9
Volunteer Service Hours	2,063½

STAFF PUBLICATIONS — 1963

BIENENSTOCK, H., et al

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Respiratory effects of Bensquinamide during general anesthesia. *Current Researches in Anesth. & Analg.* 42: 435.

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Rheumatoid arthritis of the cricoarytenoid joint: A clinicopathologic study. *Arthritis & Rheum.* 6: 48-63, Feb.

FREIBERGER, R. H.

The changing concept of rheumatoid disease and its management. *J. Michigan State Med. Soc.* 62: 657, July.

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in the treatment of dermatoses. J. Am. Ger.
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NICHOLAS, J. A.
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menopausal osteoporosis and in scoliosis. J.
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SPEECHES AND EXHIBITS — 1963

Staff Member	Title	Where Presented	Date
Howard Balensweig	Rotary Subluxation of the Carpal Navicular	Hospital for Joint Diseases, New York City	November
Goran C. H. Bauer	Kinetics of Human Bone Disease	New York State University, Downstate Medical Center	January
Goran C. H. Bauer	Techniques for Study of Bone Tissue Kinetics	Workshop on Dynamic Studies in Metabolic Bone Disease, Western Reserve University, Cleveland	March
Goran C. H. Bauer	Tracer Kinetics in Man	International Symposium on Bone Biodynamics, Henry Ford Hospital, Detroit	March
Goran C. H. Bauer	Tracer Techniques for Study of Bone Disease	Fourth Annual Symposium on Current Problems in Medicine, Veterans Administration Hosp., Bronx	May
Goran C. H. Bauer	Orthopaedics in a Changing World	Centennial Celebration, Hospital for Special Surgery, New York City	May
Goran C. H. Bauer	Correlation between Fracture Etiology and Results of Fracture Treatment	Eighth Annual Fracture Course, Hospital for Special Surgery — New York Hospital, New York City	June
Goran C. H. Bauer	Clinical Applications of Tracer Techniques for the Study of Bone Metabolism	Symposium on Use of Bone Markers, International Society of Orthopaedic Surgery and Traumatology, Vienna, Austria	September
Goran C. H. Bauer	Medical Uses of Ca ⁴⁵	Conference IAEA, Vienna, Austria	September
Goran C. H. Bauer	Tracer Studies of Skeletal Lesions	Isotope Symposium, Congress of International Society of Surgeons, Rome, Italy	September
Goran C. H. Bauer	Problems in Medical Information Processing and Retrieval	International Congress on Medical Records, Chicago	October
Goran C. H. Bauer	Tracer Studies of Bone Metabolism in Man	Seminar — Brookhaven National Laboratory, Upton, L.I.	October
Goran C. H. Bauer	Why Do the Aged Fracture Their Bones	Sigma XI Society	December
Harry Bienenstock	Rheumatoid Arthritis of the Cricoarytenoid Joint: A Clinicopathologic Study	American Academy of General Practice, Chicago	March
Harry Bienenstock	Rheumatoid Arthritis of the Cricoarytenoid Joint	Annual Scientific Assembly of General Practice	March
Harry Bienenstock	Rheumatoid Arthritis of the Cricoarytenoid Joint	American Medical Association, Atlantic City	June
Harry Bienenstock	Rheumatoid Lung Disease	Peninsula General Hospital, Far Rockaway	December
Felix Bronner	The Effect of Parathyroidectomy on the Ca Metabolism of the Rat	Gordon Research Conference, New Hampshire	July
Charles L. Burstein	Monitors and Prevention of Death Associated with Anesthesia	New York State Society of Anesthesiologists, New York City	May
Rolla D. Campbell, Jr.	Results of Surgery in the Rheumatoid Hand	American Society for Surgery of the Hand, Miami Beach	January

Rolla D. Campbell, Jr.	Carpal Luxations and Dislocations	American Academy of Orthopaedic Surgeons, Miami	January
Rolla D. Campbell, Jr.	Wrist Injuries	American Academy of Orthopaedic Surgeons, Miami	January
Rolla D. Campbell, Jr.	Fractures and Dislocations About the Wrist Diagnosis and Treatment of Rheumatoid Hand Deformities Surgical Correction of Hand Deformed by Gout	Cook County Hospital, Chicago	April
Rolla D. Campbell, Jr.	Early Management of the Crushed Foot	Committee on Trauma, American College of Surgeons, New York City	September
Rolla D. Campbell, Jr.	Management of Difficult Subtrochanteric Fracture of the Femur	American Society for the Surgery of Trauma	
Rolla D. Campbell, Jr.	Fractures of the Leg Colle's Fracture Rupture of Muscles and Tendons	Eighth Annual Fracture Course, Hospital for Special Surgery — New York Hospital, New York City	June
John R. Cobb	Spine Studies: Part IV — Selection of Fusion Area in Stable Scoliosis	American Academy of Orthopaedic Surgeons, Miami	January
William Cooper	Cerebral Palsy Hamstring Tenotomy in Cerebral Palsy Varus Osteotomy for Paralytic Dislocation of Hip	American Academy of Orthopaedic Surgeons, Miami	January
William Cooper	Surgical Methods in Cerebral Palsy	New York Society of Rehabilitation, New York City	February
William Cooper	Rehabilitation Methods in Spina Bifida	Symposium on Pediatric Surgery, New York City	March
William Cooper	Participant in Joint Conference	Canadian Council of Crippled Children and Research Council, United Cerebral Palsy, Iowa City	April
William Cooper	Official Representative and Participating Member	World Congress on Rehabilitation, Copenhagen, Denmark	June
William Cooper	Chairman, Expert Conference on Cerebral Palsy	International Society of Orthopaedic Surgery and Traumatology, Vienna, Austria	September
Rudolph Dangelmaier	The Problem of Atlanto-Axial Dislocations in Rheumatoid Arthritis	American Orthopaedic Association, Hot Springs	June
Rudolph Dangelmaier John H. Doherty	Atlanto-axial Abnormalities Fractures of the Humerus	American Radiological Society, N.A. Eighth Annual Fracture Course, Hospital for Special Surgery — New York Hospital, New York City	November June
Charles R. Dunbar	Demonstrator at Scientific Exhibit on Fractures	American Medical Association, Atlantic City	June
George E. Ehrlich	Corticosteroid-induced Complications of Rheumatoid Arthritis and their Treatment	Dade County Medical Association, Miami	January

Staff Member	Title	Where Presented	Date
George E. Ehrlich	Homecare of Arthritis	Association of Homemaker Services, New York City	January
George E. Ehrlich	Rheumatoid Arthritis of the Cricoarytenoid Joint	Annual Scientific Assembly of General Practice, Chicago	March
George E. Ehrlich	Rheumatoid Arthritis of the Cricoarytenoid Joint	American Medical Association, Atlantic City	June
George E. Ehrlich	Corticosteroid-induced Complications of Rheumatoid Arthritis	Iowa Chapter of American Academy of General Practice, Des Moines	September
George E. Ehrlich	Frequently Unrecognized Aspects of Rheumatoid Arthritis		
George E. Ehrlich	Arthritis and the Care of the Arthritic Patient	American Rheumatism Foundation, Forest Hills	September
George E. Ehrlich	Rheumatoid Disease: Deformities of the Hand	Mexican Chapter of the International Society for Traumatology & Orthopaedics, New York City	October
George E. Ehrlich	Corticosteroid-induced Complications	Illinois Academy of General Practice, Chicago	November
Kenneth C. Francis	Hemipelvectomy. Report on 100 Cases	American Academy of Orthopaedic Surgeons, Miami	January
Kenneth C. Francis	Hemipelvectomy. Report on 100 Cases	U.S. Naval Hospital, Jacksonville	January
Kenneth C. Francis	Treatment of Metastatic Carcinoma of Bone	Memorial Hospital—Sloan Kettering Institute, New York City	February
Kenneth C. Francis	Metastatic Carcinoma of the Colon	Section on Gastroenterology, New York Academy of Medicine, New York City	March
Kenneth C. Francis	Treatment of Metastatic Disease	Memorial Hospital, New York City	March
Kenneth C. Francis	Treatment of Pathological Fractures with Internal Fixation	Lehigh Valley Committee on Trauma, American College of Surgeons, Bethlehem	March
Kenneth C. Francis	Radical and Conservative Surgery for Treatment of Tumors of the Shoulder	James Ewing Society, New York City	April
Kenneth C. Francis	Radical and Conservative Surgery for Treatment of Tumors of the Shoulder		
Kenneth C. Francis	Hemipelvectomy for Treatment of Chondrosarcoma	Centennial Celebration, Hospital for Special Surgery, New York City	May
Kenneth C. Francis	Treatment of Pathological Fractures	New York State Medical Society, New York City	May
Kenneth C. Francis	Hemipelvectomy. Report on 100 Cases	Grasslands Hospital, Rye	May
Kenneth C. Francis	Hemipelvectomy for Treatment of Tumors of the Bone	Veterans Administration Hospital, Bronx	June
Robert H. Freiburger	Carpal Disruptions — Problems in Diagnosis and Results of Treatment	American College of Surgeons, Westchester Chapter	December
Robert H. Freiburger	Congenital Hip Disease	American Academy of Orthopaedic Surgeons, Miami	January
Robert H. Freiburger	Congenital Hip Dislocations and Dysplasia	Columbia-Presbyterian Medical Center, New York City	March
Robert H. Freiburger	Observations in Congenital Dislocation in the Navaho	New York Roentgen Society	April
Robert H. Freiburger		Cornell Alumni Association, New York City	April

Robert H. Freiberger Robert H. Freiberger	Hip Disease X-rays in Fracture Treatment	Downstate Medical Center, Brooklyn Eighth Annual Fracture Course, Hospital for Special Surgery - New York Hospital, New York City	May June
Robert H. Freiberger	X-ray Changes in Juvenile Rheumatoid Arthritis	Malmo A.S., Malmo, Sweden	September
Robert H. Freiberger	Roentgen Examination After Cervical Trauma	International Society of Orthopaedic Surgery and Traumatology, Vienna, Austria	September
Robert H. Freiberger	Radiological Findings in Abnormalities of the Foot	Columbia-Presbyterian Medical Center, New York City	October
Robert H. Freiberger	Present Concepts of Congenital Hip Dislocation	Robins Memorial Lecture, Nassau Radiological Society	November
Robert H. Freiberger Richard H. Freyberg	Observations in Congenital Dislocation Surgical Treatment of Rheumatoid Arthritis	American Radiological Society, N.A. American Academy of Orthopaedic Surgeons, Miami	November January
Richard H. Freyberg Richard H. Freyberg Richard H. Freyberg	Natural History of Rheumatoid Arthritis Diffuse Connective Tissue Diseases Rheumatoid Arthritis of the Cricoarytenoid	Muhlenberg Hospital, Plainview Lawrence Hospital, Bronxville Annual Scientific Assembly of General Practice, Chicago	February March March
Richard H. Freyberg Richard H. Freyberg	Rheumatoid Arthritis of the Cricoarytenoid Moderator, Clinical Roundtable Treatment of Rheumatoid Arthritis	American Medical Association, Atlantic City American Rheumatism Association, Atlantic City	June June
Richard H. Freyberg	Ankylosing Spondylitis—Its Nature and Management	2nd Uruguayan Conference on Rheumatic Diseases, Montevideo, Uruguay	October
Richard H. Freyberg	Corticosteroid Treatment of Rheumatoid Arthritis - Panel Discussion	Third Pan American Congress on Rheumatic Diseases, Santiago, Chile	October
Richard H. Freyberg Richard H. Freyberg Richard H. Freyberg	Common Manifestations of Rheumatoid Arthritis Frequently Overlooked Changing Concept of Rheumatoid Disease Rheumatoid Arthritis	Veterans Administration Hosp., Newark Conference on Therapy, St. Michael's Hospital, Newark American Academy of Orthopaedic Surgeons, Miami	November November January
M. A. Gaxiola William D. Graham William D. Graham	Spine Studies: Part IV - Selection of Fusion Area in Stable Scoliosis Fractures of the Os Calcis Metastatic Tumors of Bone	Columbia-Presbyterian Hosp., New York City British Orthopaedic Association, Sheffield, England James Ewing Society, New York City American Academy of Orthopaedic Surgeons, Miami	February May June January
William D. Graham Bernard Jacobs	Bone Tumors of the Chest Wall Slipped Capital Femoral Epiphyses		June
Bernard Jacobs	Slipped Capital Femoral Epiphyses	Cornell Alumni Meeting, Cornell University Medical College, New York City	April
Bernard Jacobs	Slipped Capital Femoral Epiphyses	New York State Medical Convention	May

Staff Member	Title	Where Presented	Date
Bernard Jacobs	Socialized Medicine: Its Implications and Complications	Yonkers Lyons Club, Yonkers	
Bernard Jacobs	Postural Problems Among Dentists	New York Dental Convention	December
Paul J. Killoran	Atlanto-axial Abnormalities	American Radiological Society, N.A.	November
Leonhard Korggold	Qualitative Test for Multiple Myeloma and Macroglobulinemia	American Association of Clinical Chemists, Philadelphia	March
Leonhard Korggold	New Methods in Immunologic Analysis	American College of Allergists, New York City	March
Leonhard Korggold	Antigenic Differences Among Human Haptoglobins Hp 2-2 and Hp 1-1	Federation of American Societies for Experimental Biology, Atlantic City	April
Leonhard Korggold	The Antigenic Microheterogeneity of Serum Proteins	XIth Colloquium on Protides of the Biological Fluids, Brugge, Belgium	May
William H. Kammerer	A Physician's View of Investigational Drugs	St. John's University of Pharmacy, Jamaica	April
Frederick Le Liebolt	The Distal Radio-ulnar Joint	American Academy of Orthopaedic Surgeons, Miami	January
Frederick Le Liebolt	Careers in Medicine	Knox College, Galesburg, Illinois	February
Frederick Le Liebolt	Vicarious Calcifications	Congress of the Pan American Medical Association	February
Frederick Le Liebolt	Acute Calcifications of the Tendons About the Wrist Joint	Club de Correspondencia, Ortopedica Panamericano	April
Frederick Le Liebolt	Injuries to the Ligaments and Cartilages of the Knee Joint	Eighth Annual Fracture Course, Hospital for Special Surgery - New York Hospital, New York City	June
Jacob C. Lifton	Fractures and Dislocations of the Knee Joint		
Klaus Mayer	Treatment of Congenital and Heritable Maxillofacial Anomalies	American Association of Orthodontists, Miami	May
Klaus Mayer	Course in Radioisotopes and Hematology	Queens General Hospital	
Klaus Mayer	Course in Radioisotopes and Hematology	Memorial Center for Cancer and Allied Diseases, New York City	
Klaus Mayer	Anerthroid Anemia	Memorial Hospital, New York City	
Victor Mayer	Thrombocytopenia		
Robert C. Mellors	Acquired Hemolytic Anemia		
Robert C. Mellors	Blood Transfusion Problems		
Robert C. Mellors	The Pediatric Hip and its Hazards		
Robert C. Mellors	Immunopathology of Rheumatoid Arthritis	Pediatric Department, Queens Hospital Center, Queens	May
Robert C. Mellors	Subcellular Elemental Analysis of Tissues with the Electron Probe	Centennial Celebration, Hospital for Special Surgery, New York City	May
Robert C. Mellors	Subcellular Elemental Analysis of Tissues with the Electron Probe	Gordon Research Conference, Kimball Academy, New Hampshire	July
Robert C. Mellors	Glomerulonephritis: Immunological Mechanisms of Renal Injury	National Institutes of Health, Bethesda	October
James A. Nicholas	Metabolic Bone Disease in Children and Adults	International Academy of Pathologists, Chicago	April
		American Academy of Orthopaedic Surgeons, Miami	January

James A. Nicholas	Osteoporosis, Osteomalacia and Related Diseases	American Academy of Orthopaedic Surgeons, Miami	January
James A. Nicholas	Pathological Fractures of the Femur	American College of Surgeons, Pittsburgh	March
James A. Nicholas	Athletic Injuries	Suffolk County Medical Society	November
Robert Lee Patterson, Jr.	Epiphyseal Ankle Fractures (Discusor)	Medical Society of the State of New York, New York City	May
Robert Lee Patterson, Jr.	The Future of the Hospital for Special Surgery	Centennial Celebration, Hospital for Special Surgery, New York City	May
Robert Lee Patterson, Jr.	Open Fractures Pathological Fractures	Eighth Annual Fracture Course, Hospital for Special Surgery - New York Hospital, New York City	June
Robert Lee Patterson, Jr.	Stabilization of the Foot	International Society of Orthopaedic Surgery and Traumatology, Vienna, Austria	September
Aaron S. Posner	The Effect of Fluoride on Bone Crystals: A Crystallographic Study	Polytechnic Institute of Brooklyn	March
Aaron S. Posner	Systemic Lupus Erythematosus	Sloan-Kettering Institute, New York City	April
William C. Robbins	A Patient with Myasthenia Gravis	Flushing Hospital, Flushing	February
William C. Robbins	Thyoma and Lupus Nephritis	American Rheumatism Association, Atlantic City	June
William C. Robbins	Serological Abnormalities in a Patient with Myasthenia Gravis, Thyoma and Systemic Lupus Erythematosus with Nephritis	Fifth European Congress on Rheumatic Diseases, Stockholm, Sweden	August
Bernard Rogoff	Diagnosis and Treatment of Childhood Rheumatoid Arthritis	Memphis and Shelby County Medical Society, Memphis	January
Bernard Rogoff	Rheumatoid Arthritis	Veterans Administration Hosp., Memphis	January
Bernard Rogoff	Degenerative Joint Disease	Academy General Practice, Buffalo Chapter	March
Bernard Rogoff	Lecture to Laity on Arthritis	New York Chapter - American Rheumatism Foundation, New York City	March
Bernard Rogoff	Clinical Management of Rheumatic Diseases	Various Universities-India, Hong Kong, Japan, and Hawaii	October
Paul D. Saville	Changes in Bone Mass With Age	Orthopaedic Research Society, Miami Beach	January
Paul D. Saville	Osteoporosis, Osteomalacia and Related Diseases	American Academy of Orthopaedic Surgeons, Miami	January
Paul D. Saville	Changes in Paralytic Osteoporosis in the Rat	Downstate Medical Center, Brooklyn	October
Lee Ramsay Straub	The Results of Surgery in the Rheumatoid Hand	American Society for Surgery of the Hand, Miami Beach	January
Lee Ramsay Straub	Discussion: Surgical Technique for Synovectomies of the Knee Joint in Rheumatoid Arthritis	American Academy of Orthopaedic Surgeons, Miami	January
Lee Ramsay Straub	Discussion: Idiopathic Avascular Necrosis of the Femoral Head		
Lee Ramsay Straub	Surgery in Chronic Arthritis		

Staff Member	Title	Where Presented	Date
Lee Ramsay Straub	Surgery of the Rheumatoid Hand	American College of Surgeons, Sectional Meeting, Pittsburgh	March
Lee Ramsay Straub	Injuries to the Hand	American College of Surgeons, Toronto Sectional Meeting	April
Lee Ramsay Straub	Crossed Tendon Transfer for Extensor Paralysis of the Hand	American Orthopaedic Association, Hot Springs	June
Lee Ramsay Straub	Fractures of the Hand	Eighth Annual Fracture Course, Hospital for Special Surgery — New York Hospital, New York City	June
Lee Ramsay Straub	Surgical Treatment of Hip in Rheumatoid Arthritis	American Rheumatism Association, Atlantic City	June
Lee Ramsay Straub	The Role of Synovium in the Production of Deformity in the Hands of the Patient with Rheumatoid Arthritis	International Society of Orthopaedic Surgery and Traumatology, Vienna, Austria	September
Lee Ramsay Straub	Surgery of Arthritis — New Concepts	American College of Surgeons, Post Graduate Course, San Francisco	October
Lee Ramsay Straub	Surgery for Arthritis Patient—When and Where	Arthritis and Rheumatism Foundation, New York City	November
Lee Ramsay Straub	The Treatment of the Shoulder and Upper Extremity in Rheumatoid Arthritis	Symposium — The Surgical Rehabilitation of Arthritic Deformities — N.Y. University Medical Center	November
Lee Ramsay Straub	Reconstruction of the Rheumatoid Hand	Third Hand Symposium, U.S. Naval Hospital, Philadelphia	December
Lee Ramsay Straub	Indications for Surgical Therapy	Arthritis and Rheumatism Foundation, New York City	December
Lee Ramsay Straub	Reconstructive Surgery in the Rheumatoid Hand	New York Academy of Medicine, New York City	December
T. Campbell Thompson	Carpal Disruptions — Problems in Diagnosis and Results in Treatment	American Academy of Orthopaedic Surgeons, Miami	January
T. Campbell Thompson	Conservative and Surgical Treatment of Common Disorders of the Forefoot	American Academy of Orthopaedic Surgeons, Miami	January
T. Campbell Thompson	Turnup-plasty Amputation	Western Orthopaedic Association, Los Angeles	April
T. Campbell Thompson	Fracture of the Acetabulum and Dislocations of the Hip	Eighth Annual Fracture Course, Hospital for Special Surgery — New York Hospital, New York City	June
T. Campbell Thompson	Fractures and Dislocations of the Elbow	Orthopaedic Seminar, Colby College, Maine	August
T. Campbell Thompson	Surgery of the Forefoot	Westchester Academy of Medicine	November
T. Campbell Thompson	Tendo-Achilles (Squeeze Test)	New York University, Post Graduate Medical School, New York City	December
T. Campbell Thompson	Orthopaedic Surgery in Poliomyelitis	American Academy of Forensic Sciences, Chicago	February
Charles J. Umberger	Forensic Problems in Presentation of Toxicological Evidence in Court Determination of Impramine in Biological Materials		

Charles J. Umberger	Identification of Interfering Tissue Components in the Analysis of Biological Samples for Drugs	American Medical Association, Atlantic City	June
Konstantin P. Veliskakis	The Analytical Toxicological Phases of the Problem of Death Following Ingestion of Toxic Substances	American Academy of Orthopaedic Surgeons, Miami	April
Harold Wainerdi	Spine Studies: Part IV – Selection of Fusion Area in Stable Scoliosis	Richmond County Medical Society, Staten Island	October
Harold Wainerdi	The Differential Diagnosis of the More Common Rheumatic Diseases	St. Vincent's Hospital, Staten Island	January
Philip D. Wilson	Gastrointestinal Lesions in Rheumatic Disease	American Academy of Orthopaedic Surgeons, Miami	June
Philip D. Wilson	Slipped Capital Femoral Epiphyses	Eighth Annual Fracture Course, Hospital for Special Surgery – New York Hospital, New York City	September
Philip D. Wilson	Fractures and Dislocations of the Spine	Congress of the International Society of Orthopaedic Surgery and Traumatology, Vienna, Austria	September
Philip D. Wilson	Presidential Address	International Federation of Colleges Meeting, Rome, Italy	January
Philip D. Wilson, Jr.	Training of the Orthopaedic Surgeon	American Academy of Orthopaedic Surgeons, Miami	February
Philip D. Wilson, Jr.	Slipped Capital Femoral Epiphysis	28th Annual Fracture Day, New York & Brooklyn Regional Committee on Trauma, American College of Surgeons	April
Philip D. Wilson, Jr.	Fractures of the Olecranon and Monteggia Fractures	Toronto Sectional Meeting of the American College of Surgeons, Toronto	June
Philip D. Wilson, Jr.	Traumatic and Degenerative Lesions of the Cervical Spine	American Orthopaedic Association, Hot Springs	June
Philip D. Wilson, Jr.	The Problem of Atlanto-Axial Dislocation in Rheumatoid Arthritis	Eighth Annual Fracture Course, Hospital for Special Surgery – New York Hospital, New York City	November
Philip D. Wilson, Jr.	Fractures and Dislocations of the Shoulder Girdle	Nassau County Roentgenological Society	
Philip D. Wilson, Jr.	Current Concepts of the Problem of Congenital Dislocation of the Hip		



GIFTS and ENDOWED BEDS

Agnew, A. C.
 Agnew, Alexander, McL.—in memoriam
 Agnew, George B.
 Agnew, John T.
 Alumni Association
 Art Fund
 Arthritis Relief Fund
 Arthritis and Rheumatism Foundation
 (Fund for hospitalization)
 Arthritis and Rheumatism Foundation Grant
 Atomic Energy Commission Grants
 Avery, Mary O. Fund
 Avery, Mary P.—in memory of her son,
 Henry Ogden Avery
 Baird, Josephine B.—Fund No. 1
 Baird Rehabilitation Study Fund
 Ballard, Edward L. Grant
 Barth Fund for Work in Scleroderma
 Barth, Tina—in memory of
 Becker, Cornelia D. Fund—in memory of
 Mary T. Becker and Joseph Becker
 Bishop, Mrs. David Wolfe, in memory of her
 husband, David Wolfe Bishop
 Bliss Fund—gift of Mrs. George Bliss
 Bliss, George—in memory of his daughter,
 Netta Bolton Bliss
 Bonnell, Florence K., for Marie E. Hampton
 Bowdoin, George—for the children of the
 Children's Aid Society
 Brooks, Walter—Foundation Fund
 Brown, Mrs. Ann D.—in memory of Annie V.
 Brown
 Brown, Mrs. George Hunter—in memory of her
 daughter, Millie Brown
 Brown, Margaret J.—Orthopedic Bed
 Bullinger, Elizabeth T.—Beds
 Bullinger, Elizabeth T.—Fund
 Bullinger, Robert E.
 B.P.O. Elks, New York Lodge No. 1
 Children's Recreation Fund
 Clark Film Library Fund
 Clark, Marian de Forest—to be known as the
 "Julian Bouton Clark Bed"
 Clubfoot Clinic Fund
 Coley, William D.—in memory of
 Curran, Elise Postley—in memory of
 James Ross Curran
 Currier, Edward West—in memory of
 Nathaniel Currier
 Currier, Edward West—in memory of
 Eliza W. Currier
 Currier, Edward West—in memory of
 West Currier
 Currier, Edward West—in memory of
 Edward W. Currier
 Currier, Estate of Laura—in memory of
 Walter B. Currier
 Davidson, Eleanor H.—Fund
 DeBarbieri, Beiter, Margaret K.—Fund
 Debruce Property Renovation
 Dellinger, Mary A.—in memory of her niece,
 Lulie Dexter
 Development Work in Cerebral Palsy
 Dubrin, Yetta—Fund
 Ehenreich, Minnie M.—Fund
 Eichner, Benjamin B.—Fund
 Eidlitz, Otto M.—Memorial Bed
 Eidlitz, Robert James—to be known as the
 "Marc Eidlitz Bed"
 Elms, Mrs. Leonard—Flower Fund
 Employees' Activities Fund
 Eustis, Marie C.—in memory of
 George C. Eustis
 Farrar, Mrs. Sarah J.—in memory of her father
 and mother, Horace and Sarah J. Theall
 Field and Bishop Cortland de Peyster, and
 Florence Van Cortland—in memory of
 Mary E. de Peyster
 Finch, Henry L.—in devoted and loving
 memory of his father and mother,
 Edward L. and Annie R. Finch
 Ford Foundation Scholarship and
 Fellowship Fund
 Fraser, Mrs. Anna M.—in memory of her
 father and mother, Hansen K. and
 Emma B. Corning
 Frelich, Mary Helen—in memory of her
 daughter, Helen Frelich
 Friendship Hall Fund
 Fromkin Robert G.—Fund for Research in
 Connective tissue diseases
 Fund for adult motion picture entertainment
 Fund for Annual Dance
 Fund for Clinc Coffee Cart
 Fund for Cerebral Palsy Research
 Fund for development of work in
 cerebral palsy
 Fund for Equipment for Neuro-Muscular
 Study
 Fund for Fellowship in Social Work
 Fund for maintenance of Solarium
 Fund for Research in Rheumatic Diseases
 Fund for Special Equipment
 Fund for treatment of Hernia Cases
 (The Delong Corporation)
 Fund in memory of Dr. William B. Coley,
 received from William Bingham II
 Gambrill, Anna Van Nest—in memory of
 Mary Thompson Van Nest
 Garland, Anne Louise Fund—in memory of:
 Robert Emmet, Jr.
 Thomas Addis Emmet
 Tudor Garland
 Hamilton Garland
 Elizabeth Garland
 James A. G. Emmet
 James A. Garland
 Charles Garland
 Aileen Emmet
 Hope Garland
 Geographic Full-Time Fund
 Gibson, W. Fraser, for the "Jeanette Fraser
 Gibson Bed"
 Gibney Memorial Fund
 Gifford, Mrs. Ellen M., in memory of
 Mrs. Ellen M. Gifford
 Golding, Sue—Social Service
 Scholarship Fund
 Greenwall, Susan, Funds
 Griswold, Mrs. Lydia Alley, in memory of her
 husband, George Griswold
 Hardware Square Club of New York

1. Patients relearn to walk with the aid of parallel bars and good physical therapists. 2. Additionally, muscles are strengthened through hydrotherapy. 3. Approximately 2000 operations are performed at HSS annually. 4. Books of all kind are provided for our clinic patients while they wait to see the physician. Coffee is served to our older patients. 5. Braces must be carefully fitted to meet the requirements of each patient.

Harnett, Katherine I. D.—in memory of
 Tommie S. Donald
 Hilson Discretionary Fund
 Hopkins, John Jay—Foundation Grant
 Hurst, Thomas D. and Kate Fund
 Istel Social Welfare Fund (formerly Social
 Service Transportation Fund)
 Janeway, Fannie Memorial Fund
 Keller, F. Wilson Memorial Fund
 Killough, Walter, H.D.—in memory of
 Walter H. D. Killough
 Knight, James, M.D.—in memory of
 James Knight, M.D.
 Krumb, Henry—Fund
 Lewis, Louise—Memorial Bed
 Logotheton Student Fund
 Lilly, Eli & Co. Grant
 Lyric Art Society—Marie T. Schaefer
 McCaffrey, John B.
 Manners, Francis L. Whittlessey—
 The Franklin Whittlessey Memorial Bed
 Manners, Francis L. Whittlessey—
 in memory of Hannah Roe Whittlessey
 Martin, Janie A.—in memory of
 Martin, Walter A.
 Medical Library Fund
 Mitchell, Minturn, Arthur—in memory of
 Roland Greene and Cornelia Port Mitchell
 Miller, Alexander, Jr.
 Miller, Annie—in memory of
 Miller, Annie—in memory of Cecil Miller
 Miller, Harriet Thompson
 Montgomery, Andrew H.—Memorial Fund
 Multiple Sclerosis Fund
 National Dairy Council Grants
 Neute, Josephine L.—in memory of
 Emily P. Munn
 Neute, Josephine L.—in memory of
 Jessie B. Brown
 New York City, Research Investigatorship
 Nurses' Alumnae Fund
 Nurses' Library Fund
 Nursing Study Fund (Mary W. Harriman Trust)
 Nursing Study Fund
 Odum—Cochran Foundation Fund
 Partridge, Franklin L.—in memory of Grace
 Partridge. Endowed by her mother
 Paton, Annie A.—in memory of
 Alexander McL. Agnew
 Patterson's Dr., Discretionary Fund
 Pillsbury, Annette Ellsworth—in memory of
 her parents and sister
 Pocher, Barbara Ellenbast—in memory of
 Frank Ellenbast
 Polachek, John Foundation Grant
 Potter, Orlando B., Fund
 President's Discretionary Fund
 Ranney, Marie Celle—in memory of
 Marie Celle Ranney
 Rashmajian, Harry—Fund
 Rathbone, Fund (The)
 Religious Flower Fund
 Reynolds, Martha S.—in memory of her
 mother, Ernestine Schaffner
 Robbins, Blanche Stern
 Robinson, Edith J. Fund for use of
 Children's Ward
 Roche, Edward and Ellen Relief Foundation
 Fund
 Rockefeller Foundation Grant
 Romeyn, Hiram Radcliff—endowed by his
 wife, Grace W. Romeyn
 Rotary Club of New York
 Russell Sage Dental Endowment Fund
 Satterwhite, Florence C.—in memory of
 James E. Martin, Jr., Preston C. Satterwhite,
 Florence C. Satterwhite
 Schomburg Fund for Care of Crippled
 Schoonmaker, Emma W.—in memory of
 Emma W. and Jacob H. Schoonmaker
 Schweckendieck, Edith M. Fund
 Secor, Mary E. Fund
 Semi-Centennial Memorial Fund
 Seybold, Paulina—in memory of
 Paulina Seybold
 Sharp, Evelyn—Equipment Fund for
 Home Assistance
 Sharp, Evelyn—Kitchen Food Supply Fund
 Shearer, George L., by his family and friends
 Sloane, William Fund
 Social Service Relief Fund
 Starin, Priscilla, T.P.—in memory of
 Ransom Parker
 Starin, Priscilla, T.P.—in memory of
 Mary Dick Parker
 Stern, Adele Fund
 Straub's Dr., Fund for Hand Clinic
 Sturges, Frederick M. Jr.—Fund
 Taylor, Charles Fayette, Memorial Fund
 Taylor, Dr. Henry Ling—in memory of
 Charles Fayette Taylor
 Thayer, Jessica Haddington Fund
 Thompson's Dr., Discretionary Fund
 Thorne, Lydia Ann—in memory of
 Lydia Ann Thorne
 Thorne, Phoebe Ann
 Tillotson, Emma L.—in memory of
 Millard Glenn Tillotson
 Tower, Joseph T.—in memory of Mary T. Tower
 Wagner, Dr. Lewic Clark, Alumni
 Resident's Fund
 Wainerdi's Dr., Harold R.—Fund for
 multiple sclerosis
 Wall, W. W.—in memory of Louis Eugene Wall
 Watson, Emily A.—in memory of
 John Watson
 Watson, Emily A.—in memory of
 Marcy L. Watson
 Watson, Emily A.—in memory of
 Mary J. Walker
 Wendel, Georgina G. R.—in memory of her
 sister Augusta Wendel
 Wendel, Georgiana G. R.—in memory of
 Josephine Wendel
 Wilson, Philip D. Fellowship Fund
 Wilson's Dr. Philip D. Surgical Research Fund
 (Various Contributors)
 Witherell, Rebecca
 Witherell, Rebecca, Endowed Bed
 Witherell, Rebecca, Open Air Fund
 Woolworth, Velma B., Fund—in tribute to the
 memory and generosity of H. Sylvia,
 A. H. G. Wilks and Ella Van E. Wendel
 Whitney, Helen Hay Foundation Grant
 X-Ray Education Fund

1963 STATISTICS

Comparative Statistics

	1963	1962
Total Patient Days	58,792	61,526
Total Clinic Visits	49,991	50,636
Percent of Occupancy	8,094	8,471
Admissions	3,070	2,684
Laboratory Tests	70,922	59,948
X-Ray Films Made	69,671	63,654
Drug Prescriptions Filled	73,452	64,782
Operations	1,970	1,817
Average length of stay (Days)	20	23
Meals Served	176,376	184,578
Hours donated by Volunteers	19,894	20,167½
Physical Medicine Treatments	34,632	33,485
Prints and Slides Prepared (Photography Department)	10,673	9,165
Total Number of Employees	669	644
Average Cost per Patient Day	\$49.82	\$38.91
Average Income per Patient Day	\$47.41	\$41.61

Summary of Patients

Out-Patient Department

First Visits	5,173
Revisits	44,818
Total	49,991

In-Patients

	Private	Semi-Private	Associated Hospital Compensation Pay and Part Pay	Public Charges	Ward Free	Total Ward	Total
Remaining January 1, 1963....	14	70	29	7	0	36	120
Admitted in 1963	497	1,739	570	263	1	834	3,070
Total Treated in 1963.....	511	1,809	599	270	1	870	3,190
Discharged	491	1,730	563	261	1	825	3,046
Deaths	7	11	5	1	0	6	24
Total Discharged	498	1,741	568	262	1	831	3,070
Remaining December 31, 1963	13	68	31	8	0	39	120

	Number of Treatments
Private	1,722
Semi-Private	8,373
Ward	4,927
Private Ambulatory	5,681
Out-Patient Department	13,929
Total	34,632



AUDITORS CERTIFICATE

MAC NICOL, JOHNSON & CO.

Certified Public Accountants

17 Battery Place

New York, N.Y. 10004

Board of Managers

New York Society for the Relief of the Ruptured and Crippled,

Maintaining the

Hospital for Special Surgery and the Margaret M. Caspary Clinic

New York 17, New York

We have examined the balance sheet as at December 31, 1963, of the New York Society for the Relief of the Ruptured and Crippled, Maintaining the Hospital for Special Surgery and the Margaret M. Caspary Clinic, and the related statement of income and expense for the year then ended.

The records of the Investment Fund, Permanent Funds, Temporary Funds for Designated Purposes and the Plant Fund are maintained by the United States Trust Co. of New York. We reviewed the transactions in these funds, but our detailed examination was limited to the records of the Research Funds which form part of the Temporary Funds. The details of the assets and principal balances of the funds were not audited at December 31, 1963, and the transactions in these funds during the year, as incorporated in the accompanying balance sheet and supporting schedules, were furnished to us by the United States Trust Co.

Our examinations of the Operating Fund and the Research Funds were made in conformity with generally accepted auditing standards, and accordingly included such tests of the accounting records and such other auditing procedures as we considered necessary in the circumstances.

In our opinion, subject to the foregoing, the accompanying balance sheet and supporting schedules and the statement of income and expense, and the summary of changes in funds present fairly the financial position of the Society at December 31, 1963 and the results of its operations for the year then ended, in accordance with generally accepted principles of accounting, applied on a basis consistent with that of the preceding year.

MAC NICOL, JOHNSON & CO.

New York, N.Y.

April 30, 1964

1. In the Ella Grey Memorial Kitchen women with many forms of disability are instructed in simple, practical ways of resuming their home-making activities. 2. To run a well-functioning hospital involving many hands and many skills—least of which is an excellent chef. 3. All children who remain in HSS for over two weeks attend P.S. 401. 4. The housekeeping personnel work hard at keeping a clean and shiny hospital. 5. The hospital has 34 beds set aside especially for children with orthopedic or rheumatic disorders.

NEW YORK SOCIETY FOR THE RELIEF

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THE HOSPITAL I

MARGARET I

Comparative Balance Sheet as at D

ASSETS

	December 31, 1963		December 31, 1962	
Operating Fund				
Cash in banks and office		\$ 51,621.61		\$ 146,358.13
Patients' accounts receivable	\$ 538,999.06		\$ 454,677.06	
Less: Allowance for uncollectible accounts	143,483.16	395,515.90	130,169.02	324,508.04
Due from Blue Cross Plans		96,715.42		64,337.55
Due from National Foundation for Infantile Paralysis		1,236.72		671.97
Due from City of New York		9,643.84		6,505.20
Loans receivable		88,400.00		73,700.00
Miscellaneous accounts receivable		18,347.18		8,841.21
Inventory of materials and supplies		64,956.95		62,180.28
Prepaid insurance		13,225.51		15,175.79
Deferred expenses		186,043.04		31,107.29
Total		<u>925,706.17</u>		<u>733,385.46</u>
Investment Fund				
Cash in commercial and savings banks		633,028.86		1,156,085.63
Investments (Market Value Dec. 31, 1963—\$6,151,857.57)		4,600,673.20		4,200,520.08
Total		<u>5,233,702.06</u>		<u>5,356,605.71</u>
Permanent Funds				
Cash in commercial and savings banks		313,281.25		369,510.10
Investments (Market Value Dec. 31, 1963—\$2,026,522.57)		1,726,719.94		1,595,631.44
Total		<u>2,040,001.19</u>		<u>1,965,141.54</u>
Temporary Funds for Designated Purposes				
Cash in commercial and savings banks		335,910.66		278,692.42
Research grants receivable		173,570.71		58,279.87
Investments (Market Value Dec. 31, 1963—\$1,190,132.85)		1,012,708.34		947,060.74
Inventory of supplies		—		6,480.02
Due from Operating Fund		13,003.23		—
Due from Investment Fund		—		36,111.02
Due from doctors		16,500.00		—
Total		<u>1,551,692.94</u>		<u>1,326,624.07</u>
Plant Fund				
Hospital properties and equipment				
Cost	7,635,510.31		7,524,687.23	
Less: Accumulated depreciation	1,427,933.81	6,207,576.50	1,228,230.74	6,296,456.49
Research building and equipment				
Cost	3,301,013.64		3,161,859.66	
Less: Accumulated depreciation	318,453.15	2,982,560.49	211,569.91	2,950,289.75
Construction in Progress—Research		6,991.48		—
Due from Funds for Designated Purposes		318,453.15		211,569.91
Total		<u>9,515,581.62</u>		<u>9,458,316.15</u>
TOTAL ASSETS		<u>\$19,266,683.98</u>		<u>\$18,840,072.93</u>

THE RUPTURED AND CRIPPLED

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SPECIAL SURGERY

SPARY CLINIC

ber 31, 1963 and December 31, 1962

LIABILITIES, CAPITAL AND SURPLUS

	December 31, 1963	December 31, 1962
Operating Fund		
Accounts payable	\$ 200,659.84	\$ 137,995.20
Accrued salaries payable	72,369.50	79,552.54
Taxes payable	63,144.97	65,708.84
Sundry liabilities	62,630.45	122,079.95
Unexpended balances of special funds	49,311.57	49,091.24
Due to Temporary Fund	13,003.23	—
Reserve for insurance premium adjustments	36,000.00	36,000.00
Total	497,119.56	490,427.77
Working Capital	428,586.61	242,957.69
Total	925,706.17	733,385.46
Investment Fund		
Due to Temporary Funds	—	36,111.02
Investment Fund Principal	5,233,702.06	5,320,494.69
Total	5,233,702.06	5,356,605.71
Permanent Funds		
Principal — Unrestricted as to Use of Income	325,675.85	318,255.03
Principal — Restricted as to Use of Income	1,672,140.40	1,613,316.15
Unexpended balance of Restricted Income	42,184.94	33,570.36
Total	2,040,001.19	1,965,141.54
Temporary Funds for Designated Purposes		
Unappropriated Principal	1,224,399.94	1,098,370.51
Unappropriated income balance	8,479.85	8,786.15
Accounts payable	—	7,537.50
Deferred credits	360.00	360.00
Due to Plant Fund	318,453.15	211,569.91
Total	1,551,692.94	1,326,624.07
Plant Fund		
Loans payable	319,351.46	319,424.67
Plant Capital	9,196,230.16	9,138,891.48
Total	9,515,581.62	9,458,316.15
TOTAL LIABILITIES, CAPITAL AND SURPLUS	\$19,266,683.98	\$18,840,072.93

NEW YORK SOCIETY FOR THE RELIEF OF THE RUPTURED AND CRIPPLED
Maintaining
THE HOSPITAL FOR SPECIAL SURGERY
MARGARET M. CASPARY CLINIC

Condensed Comparative Statement of Income and Expense
for the Years Ended December 31, 1963 and December 31, 1962

	Year Ended December 31, 1963	1962
Income from patients, less allowances	\$3,273,219.83	\$3,015,846.24
Less: Provision for uncollectible accounts receivable	25,000.00	25,000.00
Income from Patients after Deductions	3,248,219.83	2,990,846.24
Add: Other Hospital Operating Income		
Collections on accounts previously written off	194.04	87.61
Purchase discounts	5,588.73	4,923.57
Rent income	1,776.94	2,669.16
Cafeteria receipts	126,839.81	133,918.23
Record room fees	3,588.50	3,880.40
Overhead earned	51,441.16	51,255.74
Miscellaneous	62,958.02	35,079.12
Total Other Hospital Operating Income	252,387.20	231,813.83
Total Hospital Operating Income	3,500,607.03	3,222,660.07
Operating Expenses		
Salaries and wages	2,837,269.12	2,410,663.51
Supplies and expense	1,340,724.46	1,118,623.16
Depreciation of buildings and equipment	199,703.07	196,690.26
Total Operating Expenses	4,377,696.65	3,725,976.93
Hospital Operating Loss	877,089.62	503,316.86
Less: Transfers from Temporary Funds	121,061.35	88,122.25
Excess of Hospital Operating Expenses over Hospital Operating Income (Charged to Working Capital)	756,028.27	415,194.61
Supplementary Income		
Interest and dividends (net)	247,378.95	254,575.35
Income from estates and trusts	57,274.34	57,513.26
Income from 77th Street Property — net	9,745.89	13,691.79
Contributions:		
United Hospital Fund and Greater New York Fund	26,739.00	42,040.00
Other gifts and contributions	153,689.74	109,675.17
Women's Auxiliary — Social Service	15,480.00	14,000.00
Total Supplementary Income	510,307.92	491,495.57
Less:		
Fund Raising and Public Relations Planning	45,160.37	46,989.21
Centennial expense	55,197.41	—
Miscellaneous, legal and professional service	24,173.28	23,848.49
Total Deductions from Supplementary Income	124,531.06	70,837.70
Supplementary Income (Net) (Credited to Investment Fund Principal)	385,776.86	420,657.87
Excess of Income over Expenses for the Year		\$ 5,463.26
Excess of Expenses over Income for the Year	\$ 370,251.41	

Note: (a)

Expenditures made during 1963 for research salaries and supplies amounting to \$427,914.26 were paid with special funds designated for such purposes and are not included in the above operating expenses.

**NEW YORK SOCIETY FOR THE RELIEF OF THE RUPTURED AND CRIPPLED
Maintaining
THE HOSPITAL FOR SPECIAL SURGERY — MARGARET M. CASPARY CLINIC**

**Summary of Changes in Principal Balances of All Funds
during the Year Ended December 31, 1963**

	Total All Funds	Working Capital	Investment Fund Principal	Permanent Fund Principal and Restricted Income	Temporary Funds for Special Purposes	Liability	Plant Fund Plant Capital
Balance — December 31, 1962	\$18,094,066.73	\$ 242,957.69	\$5,320,494.69	\$1,965,141.54	\$1,107,156.66	\$319,424.67	\$9,138,891.48
Add:							
Transferred from other funds	1,125,341.82	868,300.07	—	57,930.23	983,823.11	—	257,041.75
Legacies and gifts received	1,289,372.03	—	247,618.69	—	—	—	—
Net gain or (loss) from sale of investments	27,047.98	—	(2,507.16)	8,314.84	21,240.30	—	—
Non-operating income (net)	512,540.98	—	385,776.86	60,503.66	66,260.46	—	—
Proceeds received representing cash surrender value on cancellation of Doctors' Annuity Policies	150,911.94	150,911.94	—	—	—	—	—
To close out First National City Bank of New York Research Building checking account	.10	—	.10	—	—	—	—
Total Additions	3,105,214.85	1,019,212.01	630,888.49	126,748.73	1,071,323.87	—	257,041.75
Deduct:							
Transfer to: Working Capital Temporary Funds for Special Purposes	868,300.07	—	668,597.00	—	—	—	199,703.07(a)
Plant Capital	63,817.74	63,817.74	—	—	—	—	—
Disbursements charged against principal or accumulated income	49,084.12	—	49,084.12	—	—	—	—
Reduction of loan payable — insurance rebate received and transferred to the Philip D. Wilson Foundation	997,489.82	—	—	51,889.08	945,600.74	—	—
Adjustment of prior year's expense — Doctors' Annuity Policies	73.21	—	—	—	—	73.21	—
Hospital Operating Loss	13,737.08	13,737.08	—	—	—	—	—
Total Deductions	756,028.27	756,028.27	717,681.12	51,889.08	945,600.74	73.21	199,703.07
Balances — December 31, 1963	\$18,450,751.27	\$ 428,586.61	\$5,233,702.06	\$2,040,001.19	\$1,232,879.79	\$319,351.46	\$9,196,230.16

(a) Depreciation on hospital building and equipment.

**DEPARTMENT OF RESEARCH
PHILIP D. WILSON RESEARCH FOUNDATION**

**Details of Changes in the Research Fund
during the Year Ended December 31, 1963**

	Total All Funds	Research Funds	U.S. Public Health Grants	Atomic Energy Commission Grants	Other Grants
Balances Available at December 31, 1962	\$147,923.02	\$ (32,454.96)	\$138,551.45	\$ —	\$41,826.53
Additions:					
Income earned and appropriated	47,695.05	40,157.55	7,537.50	—	—
New gifts and grants received	699,129.78	193,125.75	452,620.84	24,959.00	28,424.19
Refund balance of Unexpended Grants	(10,740.06)	—	(9,664.53)	—	(1,075.53)
Total Additions	736,084.77	233,283.30	450,493.81	24,959.00	27,348.66
Deductions:					
Salaries	294,998.50	123,167.76	143,327.03	3,581.52	24,922.19
Expenses and commitments	132,915.76	76,342.03	51,359.21	1.74	5,212.78
Overhead	49,059.96	11,164.57	34,735.85	1,565.13	1,594.41
Equipment — purchased	123,651.94	7,326.20	104,528.30	10,199.32	1,598.12
Deductions before Depreciation	600,626.16	218,000.56	333,950.39	15,347.71	33,327.50
Depreciation on building and equipment	106,883.24	106,883.24	—	—	—
Total Deductions	707,509.40	324,883.80	333,950.39	15,347.71	33,327.50
Balances Available at December 31, 1963	<u>\$176,498.39</u>	<u>\$ (124,055.46)</u>	<u>\$255,094.87</u>	<u>\$ 9,611.29</u>	<u>\$35,847.69</u>

**PHILIP D. WILSON RESEARCH FOUNDATION
Comparative Balance Sheet
as of December 31, 1963 and December 31, 1962**

ASSETS

	December 31, 1963	December 31, 1962
Cash:		
United States Trust Company	\$ 17,164.71	\$ 11,059.54
New York Savings Bank	59,000.00	59,000.00
Roslyn Savings Bank	33,000.00	33,000.00
	\$109,164.71	\$103,059.54
Loan receivable	319,351.46	319,424.67
TOTAL ASSETS	<u>\$428,516.17</u>	<u>\$422,484.21</u>

PRINCIPAL

Beginning Balance	\$422,484.21	\$417,797.31
Gifts and donations	5,000.00	4,800.00
Interest on savings accounts	3,528.10	1,473.63
Sundry expenses	(2,496.14)	(1,586.73)
PRINCIPAL BALANCE	<u>\$428,516.17</u>	<u>\$422,484.21</u>

1864-1964 OFFICERS OF THE SOCIETY

PRESIDENTS

(Dates Inclusive)

Green, John C.	1864-1874
Brown, Stewart	1875-1879
Willets, Samuel	1880-1883
Macy, William H.	1883-1887
Osborn, William H.	1887-1890
Isham, William B.	1891-1901
Sturges, Frederick	1901-1910
Osborn, William Church	1910-1925
Melcher, John S.	1926-1928
Osborn, William Church— Acting President	1928-1930
Osborn, William Church	1931-1937
Osborn, William Church— President Emeritus	1938-1951
Rossiter, Arthur W.	1938-1948
Duryee, Samuel S.	1948-1958
Bastedo, Philip	1958-

CHAIRMAN OF THE EXECUTIVE COMMITTEE

Miller, Lawrence McK.	1956-
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VICE-PRESIDENTS

(Dates Inclusive)

Minturn, Robert B.	1864-1865
Brown, Stewart	1864-1874
Lenox, James	1864-1879
Wetmore, A. R.	1864-1880
Wolfe, John David	1864-1872
Griswold, George	1866-1875
Willets, Samuel	1873-1879
Corning, H. K.	1875-1877
Macy, William H.	1876-1882
Terbell, Henry	1878-1887
Hoe, Robert	1880-1883
Colgate, Robert	1880-1884
Osborn, William H.	1881-1886
Potter, Orlando	1883-1893
Iselin, Adrian	1884-1904
Isham, William B.	1885-1890
Agnew, Alexander L.	1905-1908
Webb, William H.	1887-1890
Kingland, William M.	1888-1894
Thorne, Samuel	1892-1904
Kennedy, John S.	1892-1905
Bliss, George	1894-1908
Willets, John T.	1895
Stearns, John Noble	1897-1911
Wing, John D.	1906
Macy, William H. Jr.	1905-1909
Iselin, Ernest	1908-1912
Brown, Vernon Carleton	1931-1951
Wing, Morgan	1935-1944
Thieriot, Charles H.	1937-1948
Wilmerding, Lucius	1940
Duryee, Samuel S.	1941-1949
Wing, Morgan, Jr.	1945-1948
Miller, Lawrence McK.	1948-1952
Finch, Henry L.	1949-1956

Symington, Charles J.	1951-1955
Pillot, André P.	1952-1958
Fletcher, Mrs. Walter D.	1955-
Reynolds, Mrs. John H.	1956-
Noel, Louis W.	1956-
Hilson, Mrs. Edwin I.	1957-
Stevenson, T. Kennedy	1958-1963
Rawle, Marshall	1964-

TREASURERS

(Dates Inclusive)

Sturges, Jonathan	1864-1874
Sturges, Frederick	1875-1906
Melcher, John S.	1907-1925
Shearer, George L.	1926-1946
Stewart, Wm. A. W.	1946-1955
Stewart, E. Sheldon	1955-

ASSISTANT TREASURERS

Hoguet, Robert L., Jr.	1956-1963
Dyson, Charles H.	1964-

CORRESPONDING SECRETARIES

Hartley, Robert M.	1864-1871
Swan, Otis D.	1872-1876
Abbe, George W.	1877-1878
Stewart, W. A. W.	1879-1887
Stetson, Francis Lynde	1888-1889
Sturges, William C.	1890-1896
Jennings, Walter	1897
Stearns, John Noble	1924-1930
Eyre, Edgar Ainsworth	1931-1935
Finch, Henry L.	1936-1949
Townsend, Reginald T.	1949-1956
Hilson, Mrs. Edwin I.	1957-1958
Osborn, William H., Jr.	1958-

RECORDING SECRETARIES

Collins, Joseph B.	1864-1867
Swan, Otis D.	1868-1871
Hartley, Robert M.	1872-1875
Warburton, A. F.	1876-1878
Abbe, George W.	1879
Townsend, John P.	1880-1897
Eyre, Edgar Ainsworth	1924-1930
Miller, Lawrence McK.	1931-1949
Melcher, John	1949-1956

CORRESPONDING SECRETARIES AND RECORDING SECRETARIES

Jennings, Walter	1898-1899
Osborn, William Church	1900-1909
Stearns, John Noble	1910-1923

SECRETARIES

Melcher, John	1956
Rawle, Marshall	1957-1964
Osborn, William H., Jr.	1964-

1864-1964 BOARD OF MANAGERS

(Dates Inclusive)

Abbe, George W.	1864-1879	Golding, Jerrold R.	1953-
Agnew, Alexander McL.	1876-1890	Green, John C.	1864-1874
Bastedo, Philip	1955-	Griswold, George	1864-1875
Beekman, James W.	1864-1865	Hagaman, Frederick P.	1957-1962
	1868-1870	Handy, Parker	1874-1876
Billings, Frederick	1888-1889	Harris, Jr., Henry U.	1961-
Bishop, David Wolfe	1882-1899	Hartley, Robert M.	1864-1875
Bishop, Nathan	1864-1867	Hartshorn, Dr. W. Morgan	1941-1955
Bliss, George	1887-1895	Harvey, Alexander D.	1957-
Bliss, Walter	1911-1922	Hay, Louis C.	1929-1938
Bonner, Robert	1879-1881	Hayes, R. Somers	1901-1904
Booth, William A.	1864-1865	Hilson, Edwin I.	1951-1952
Bradford, William H.	1878-1895	Hilson, Mrs. Edwin I.	1952-
Brown, Stewart	1864-1879	Hoe, Robert	1878-1883
Brown, Vernon C.	1931-1944	Hoffman, Samuel V.	1873
Cabot, F. Higginson	1926-1928	Hoepli, Mrs. M. Henry	1958-1962
Caswell, John	1866-1867	Hoffman, William B.	1877-1880
Chapin, L. H. Paul	1931-1935	Hoguet, Dr. Joseph P.	1931-1946
Church, John A.	1940-1941	Hoguet, Jr., Robert L.	1953-
Clark, C. C.	1888-1899	Holbrook, Mrs. John	1962-
Clark, Jr., George C.	1906-1909	Hoppin, William W.	1936-1948
Colgate, Charles	1872-1877	Hutton, Mrs. Edward F.	1955-1959
Colgate, R. R.	1908-1921	Iselin, Adrian	1881-1904
Colgate, Robert	1869-1884	Iselin, Jr., Adrian	1902-1928
Collins, Joseph B.	1864-1867	Iselin, Ernest	1929-1951
Cooper, Peter	1868-1870	Isham, William B.	1880-1908
Corning, H. K.	1866-1877	Jackson, William H.	1953-1955
Davison, F. Trubee	1923-1924	Jaffrey, Edward S.	1866-1877
Davison, H. P.	1912-1921	Jennings, Walter	1892-1899
Denny, Thomas	1864-1875	Kellogg, James C.	1964-
DePew, Chauncey M.	1897-1901	Kennedy, John S.	1890-1908
Draper, William H.	1897-1900	Kingsland, William M.	1877-1904
Drexel, III, Mrs. John R.	1959-1961	Knapp, Theodore J.	1943-1947
Dyree, Samuel S.	1940-1961	Lapham, Lewis A.	1955-1957
Dyson, Charles H.	1959-	Lawrence, Effingham	1939-1940
Elliott, Howard	1920-1928	Lawrence, James F.	1964-
Eyre, Edgar Ainsworth	1923-1935	Lenox, James	1864-1879
	1945-1955	Livingston, John C.	1908-1914
Fancher, Enoch L.	1864-1865	McLane, Guy R.	1906-1911
Finch, Henry L.	1929-1960		1914-1920
Fiske, Josiah M.	1879-1881	Macy, William H.	1871-1886
Fletcher, Walter D.	1941	Macy, Jr., William H.	1892-1912
Fletcher, Mrs. Walter D.	1950-	Magoun, George C.	1886-1891
Fried, Mrs. Walter J.	1962-	Melcher, John	1923-1956
Gibson, W. Frazer	1931-1937	Melcher, John S.	1906-1927
Gilman, William C.	1864-1871	Miller, Charles A.	1894-1897
Gillespie, Jr., S. Hazard	1955-1959	Miller, Lawrence McK.	1926-
	1961-	Minturn, Robert B.	1864-1865

Mixer, David M.	1960-
Moore, William S.	1938-1940
Morgan, Hon. Edwin D.	1880-1881
Noel, Louis W.	1936-
Osborn, A. Perry	1941-1951
Osborn, Frederick H.	1913-1928
Osborn, William Church	1892-1951
Osborn, Earl D.	1951-1963
Osborn, William H.	1871-1891
Osborn, Jr., William H.	1957-
Parsons, Henry I.	1908-1912
Pennoyer, Paul G.	1955-1957
Pierson, Dr. Richard N.	1957-1963
Pillot, André P.	1941-1958
Pool, Beekman H.	1948-1950
Potter, Frederick	1910-1916
Potter, Orlando	1921-1924
Potter, Orlando B.	1875-1893
Prentice, Robert Kelly	1906-1958
Pruyn, Erving	1931-1942
Quincy, John W.	1864-1870
Rawle, Marshall	1955-
Redmond, Geraldyn	1907-1918
Redmond, Roland S.	1919-1924
Reynolds, Mrs. John H.	1949-
Robbins, Chandler	1876-1887
Rockefeller, William A.	1923-1930
Rogers, Francis Day	1961-
Rossiter, Arthur W.	1921-1950
Scoville, Robert	1931-1934
Shearer, George L.	1921-1946
Simmons, Frank Hunter	1917-1927
	1929-1930
Sloane, William	1900-1916
Smith, S. Sidney	1900-1921
Stearns, John Noble	1889-1906
Stearns, John N.	1902-1908
	1909-1936
Stearns, Jr., John N.	1919-1930
Stetson, Francis Lynde	1888-1889
Stevenson, T. Kennedy	1949-
Stewart, E. Sheldon	1947-
Stewart, W. A. W.	1879-1887
Stewart, Wm. A. W.	1946-1955
Stout, Francis A.	1883-1888
Straus, Nathan, III	1950-1958
Stuart, Robert L.	1871-1873
Sturges, Arthur P.	1897-1909

Sturges, Frederick	1871-1909
Sturges, Frederick	1931-1935
Sturges, Jonathan	1864-1874
Sturges, William C.	1885-1896
Swan, Otis D.	1866-1876
Symington, Charles J.	1941-1955
Terbell, Henry S.	1864-1887
Thieriot, Charles H.	1936-1940
Thorne, Samuel	1880-1905
Tompkins, B. A.	1952-1955
Townsend, John P.	1876-1897
Townsend, Reginald T.	1944-1957
Trumbull, Frank	1913-1919
Vanderbilt, Cornelius	1881-1895
VanRensselaer, Alex	1874-1878
Wall, Albert Carey	1957-1960
Warburton, A. F.	1876-1878
Webb, H. Walter	1893-1898
Webb, William H.	1882-1894
Wetmore, A. R.	1864-1880
Whitman, Dr. Royal	1932-1934
Willets, Howard	1913-1928
Willets, John T.	1886-1911
Willets, Samuel	1868-1882
Wilmerding, Lucius	1935-1949
Wing, John D.	1896-1909
Wing, J. Morgan	1910-1928
Wing, Morgan	1921-1950
Wing, Jr., Morgan	1946-1953
Witter, Jr., Dean	1959-
Witthaus, Rudolph A.	1864
Wolfe, John David	1864-1872
Wood, Oliver	1864-1868
	and 1870
Wriston, Walter B.	1958-

ADVISORY COUNCIL

Duryee, Samuel S.	1961-
Eyre, Edgar Ainsworth	1955-1962
Hartshorn, Dr. W. Morgan	1955-1956
Osborn, Earl D.	1964-
Pierson, Richard N., M.D.	1964-
Pillot, André P.	1958-1963
Stewart, William A. W.	1955-1960
Symington, Charles J.	1955-
Townsend, Reginald T.	1957-
Tompkins, B. A.	1962-

ENDOWED BEDS

A bed may be endowed by an unrestricted gift to the Society of not less than \$7,500 made for that purpose, and the donor during his life, or, if the gift is made by will, the person named in the will for a period not to exceed twenty years, shall have the right to designate an occupant of such bed. When the gift amounts to \$10,000 or more, the Society will furnish to the designated occupant of such bed without charge in any one calendar year care and services, the cost of which, computed at the Society's then scale of rates, equals the income earned by the Society on the amount of such gift, computed upon the basis of the average rate of return on the Society's general funds during the preceding calendar year. The Society will list all endowed beds in its annual report and record the same on appropriate plaques in the Hospital.

THE HOSPITAL FOR SPECIAL SURGERY

A MEMORIAL

TO THE HONORABLE AND WISE

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ENDOWED BEQUEST

LEGACIES OF THE SOCIETY

The Society has always been greatly aided by this form of generosity. No precise words are necessary to a valid legacy to the corporation. The following form, however, may be suggested:

"I give to New York Society for the Relief of the Ruptured and Crippled, located at 535 East 70th Street, New York City, the sum of

Dollars."

THE HOSPITAL FOR SPECIAL SURGERY

is affiliated with

The New York Hospital and Cornell University

is a member of

The American Hospital Association

The Hospital Association of New York State

The Greater New York Hospital Association

The United Hospital Fund

The Greater New York Fund

is accredited by

The Joint Commission on Accreditation of Hospitals

The Council on Medical Education and Hospitals of

the American Medical Association for

Resident Training in Orthopedic Surgery

is registered by

The Department of Social Welfare of New York State

participates in

The International Education Exchange Visitors

Program in the United States Department of State

